STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2013 029245

2013 APR 24 AM 10: 59

MICHAEL B. BROWN

RETURN TO: HODGES & BACOR, P.E.R.

Attorneys at Law 8700 Broadway Merrillville, IN 46410

RELEASE OF HOSPITAL LIEN

This is to certify that a certain Hospital Lien by THE METHODIST HOSPITALS, INC., Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against <u>LESLIE PERRY JR</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 26th day of September, 2011, and recorded on the 17th day of October, 2011 (as instrument number 2011-057515), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>LESLIE</u> <u>PERRY JR</u>, in the amount of <u>One Thousand One Hundred Sixty-One and 75/100</u> (\$1,161.75)

Dollars, is released this day of In the event full payment of the hospital charges has not been received, The Methodist Hospitals, Inc. specifically reserves all rights it may have to collect the balance due. Count order! HOSPITALS, INC. olanda Jaime STATE OF INDIANA COUNTY OF LAKE Yolanda Jaime, being the Service Unit Manager for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct. Subscribed and sworn to before me, a Notary Notary Public County A Resident of Official Seal My Commission Expires: LISA M. STONE
Resident of Lake County, IN
My commission expires March My2019 (SEAL I affirm, under the penalties for perjury, that I have taken reasonable Matactacach social security number in this document, unless required by law. This instrument Prepared By: Earle F. Hites, Attorney at Law 8700 Broadway, Merrillville, IN 46410 **AMOUNT \$** CASH. CHECK # **OVERAGE**

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