

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2013 050288

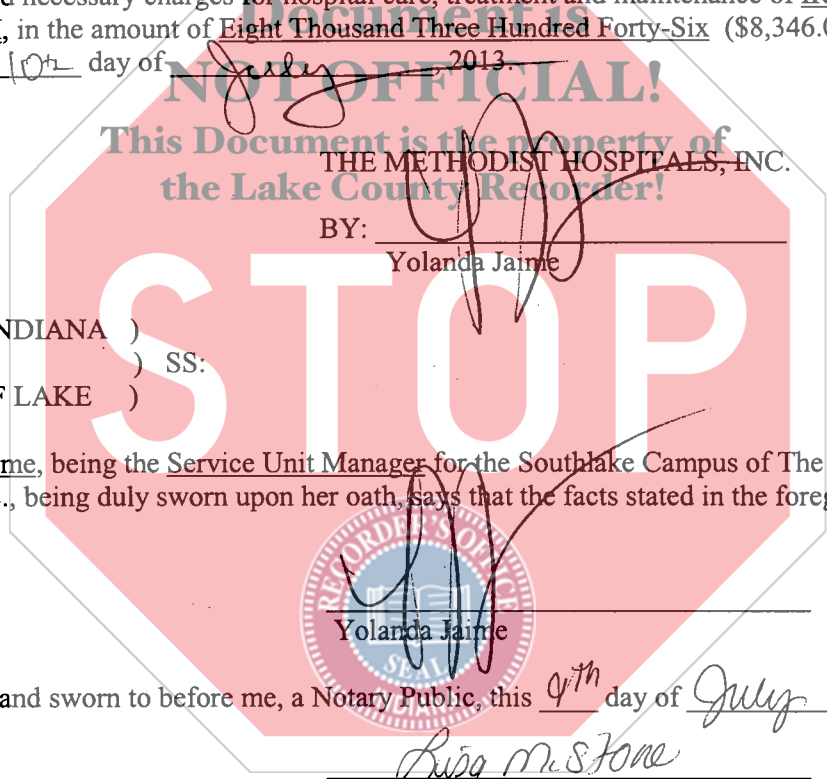
2013 JUL 11 AM 9:48

MICHAEL B. BROWN
RECORDER

RETURN TO: HODGES & DAVIS, P.C.
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 IRENE MICHALSKI, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 4th day of September, 2012, and recorded on the 20th day of September, 2012 (as instrument number 2012-066373), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of IRENE MICHALSKI, in the amount of Eight Thousand Three Hundred Forty-Six (\$8,346.00) Dollars, is released this 10th day of July, 2013.



THE METHODIST HOSPITALS, INC.
BY: Yolanda Jaime

STATE OF INDIANA)
) SS:
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.

Yolanda Jaime
Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 9th day of July, 2013.

Lisa M. Stone
Notary Public
A Resident of Lake County

My Commission Expires:
March 24, 2019



I affirm, under the penalties of perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law.

This instrument Prepared By: Earle F. Hites
Earle F. Hites, Attorney at Law
8700 Broadway, Merrillville, IN 46410

7777-207631

AMOUNT \$ 12-
CASH CHARGE
CHECK # 18943
OVERAGE _____
COPY _____
NON-COM _____
CLERK _____

E F Hites