STATE OF INDIA.I... LAKE COUNTY FILED FOR RECORD

2013 050648

2013 JUL 12 PM 12: 58

MICHAEL B. BROWN RETURN TO: HODGER & COARDISAP.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.,
Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against EARLIE S. HILL, represented
by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on
the 2nd day of July, 2008, and recorded on the 21st day of July, 2008 (as instrument number
2008-052172), in the Office of the Recorder of Lake County, Indiana, for the reasonable and
necessary charges for hospital care, treatment and maintenance of EARLIE S. HILL, in the
amount of Three Thousand Four Hundred Eighteen (\$3,418.00) Dollars, is released this
day of 2013. TOFFICIAL
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.
THE METHODIST HOSPITALS, INC.
BY:
Yolanda Jaime
STATE OF INDIANA)
STATE OF INDIANA) SS:
COUNTY OF LAKE
COUNTY OF ENERGY
Yolanda Jaime, being the Service Unit Manager for the Northlake Campus of The Methodist
Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true
and correct.
Yolande Jaime
Subscribed and sworn to before me, a Notary Public, this day of day of 2013.
Swa MISTORO
Notary Public
A Resident of Jake County
My Commission Expires: Official Seal
Manager 11 On March 12 (SEAL) (SEAL) (SEAL) (SEAL)
My commission expires March 24, 2019
I affirm, under the penalties for 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, Attorney at Law 8700 Broadway, Merrillville, IN 46410

7777-167709

AMOUNT \$ CASH. CHECK #. OVERAGE. COPY_ NON-COM CLERK_