STATE OF INDIA LAKE COUNTY FILED FOR RECORD

2014 011327

2014 FEB 26 AM 11: 31

RETURN TO: HODGES & Attorneys at 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 TIMOTHY VAUGHN II, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 20th day of August, 2012, and recorded on the 31st day of August, 2012 (as instrument number 2012-059522), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>TIMOTHY</u> <u>VAUGHN II</u>, in the amount of <u>Two Thousand Sixty Three and 50/100</u> (\$2,063.50) Dollars, is

released this July of July 2014. the Lake THE METH ODIST Yolanda STATE OF INDIANA SS: COUNTY OF LAKE 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. Subscribed and sworn to before me, a Notary Public, this Notary Public rance A Resident of County My Commission Expires: Official Seal LISA M. STONE
Resident of Lake County, IN (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

7777-207135

AMOUNT \$ CASH-CHECK# OVERAGE COPY. NON-COM CLERK\_D