

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2014 016138

2014 MAR 19 PM 12:40

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 ANTHONY LOFRANO, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 29th day of October, 2012, and recorded on the 5th day of December, 2012 (as instrument number 2012-085705), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of ANTHONY LOFRANO, in the amount of One Thousand Twenty-Six and 25/100 (\$1,026.25) Dollars, is released this 18th day of March, 2014.

NOT OFFICIAL!
This Document is the property of
the Lake County Recorder!

THE METHODIST HOSPITALS, INC.
BY: Yolanda Jaime

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

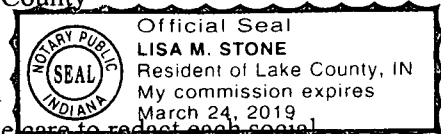
Yolanda Jaime, being the Service Unit Manager for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct.

Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 12th day of March, 2014.

Lisa M. Stone
Notary Public
A Resident of Lake County

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

AMOUNT \$ 12-
CASH CHARGE
CHECK # 19519
OVERAGE _____
COPY _____
NON-COM _____
CLERK EA

7777-210008