STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2015 022367

2015 APR 16 AM 9:44

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, 600 Grant Street, Gary, Indiana 46402, against BASEL MUSLEH, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 18th day of October, 2013, and recorded on the 25th day of October, 2013 (as instrument number 2013-079607), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of BASEL MUSLEH, in the amount of Two Thousand Three Hundred Ninety-Eight ($2398.00) Dollars, is released this 9th day of April, 2015.

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

THE METHODIST HOSPITALS, INC.

BY: Cheryl Krupa
Cheryl Krupa

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Cheryl Krupa, being the Supervisor Patient Accounts 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.

Cheryl Krupa
Cheryl Krupa

Subscribed and sworn to before me, a Notary Public, this 9th day of April, 2015.

DEBRA A ROSE
Notary Public - Seal
State of Indiana
Lake County
My Commission Expires Apr 23, 2022

Debra A Rose
Notary Public

A Resident of Lake County

My Commission Expires:
April 23, 2022

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

7777-220655.001

AMOUNT $ 12—
CASH _____ CHARGE _____
CHECK # 20240
OVERAGE _____
COPY _____
NON - COM _____
CLERK RM

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