

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2015 022379

2015 APR 16 AM 9:45

MICHAEL B. BROWN  
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., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against DWAYNE TILLMAN, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 17th day of February, 2015, and recorded on the 17th day of March, 2015 (as instrument number 2015-014631), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of DWAYNE TILLMAN, in the amount of Seven Thousand Four Hundred Thirty and 50/100 (\$7,430.50) Dollars, is released this 9th day of April, 2015.

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.

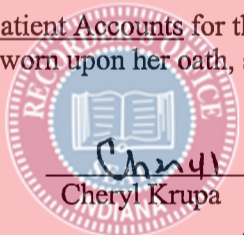
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THE METHODIST HOSPITALS, INC.

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  
A Resident of Lake County

April 23, 2012

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  
Earle F. Hites, Attorney at Law  
8700 Broadway, Merrillville, IN 46410

7777-237258

ACCOUNT # 12-  
CASE # CHARGE  
CHECK # 20240  
COVERAGE \_\_\_\_\_  
COPY \_\_\_\_\_  
NON-COM \_\_\_\_\_  
CLERK LN