

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2015 059670

2015 SEP -2 PM 12: 26

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., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against YOLANDA MONTGOMERY, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 20th day of May, 2013, and recorded on the 17th day of June, 2013 (as instrument number 2013-044433), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of YOLANDA MONTGOMERY, in the amount of One Thousand Six Hundred Eighty-Three (\$1,683.00) Dollars, is released this 1st day of September, 2015.



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.



Subscribed and sworn to before me, a Notary Public, this 27th day of August, 2015.

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

Cheryl Krupa
Cheryl Krupa
Notary Public
A Resident of Lake County

Apr 11 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
Earle F. Hites, Attorney at Law
8700 Broadway, Merrillville, IN 46410

#7777-215152.002

AMOUNT \$ 12
DASH _____ CHARGE _____
CHECK # 20990
OVERLAGE _____
JOINT _____
NON-COM _____
CLERK MMW
E