

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2015 059685

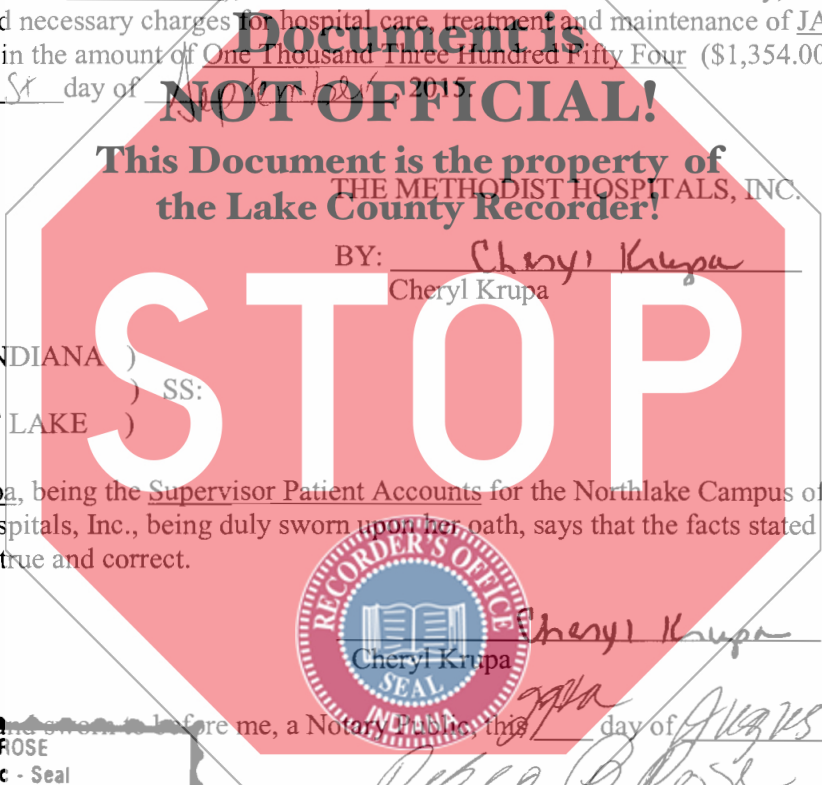
2015 SEP -2 PM 12: 27

MICHAEL B. BROWN
RECORDER

RETURN TO: HODGES & COMPANY, 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 JAMES CROSSLEY, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 31st day of July, 2012, and recorded on the 27th day of September, 2012 (as instrument number 2012-068057), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of JAMES CROSSLEY, in the amount of One Thousand Three Hundred Fifty Four (\$1,354.00) Dollars, is released this 1st day of September, 2015.



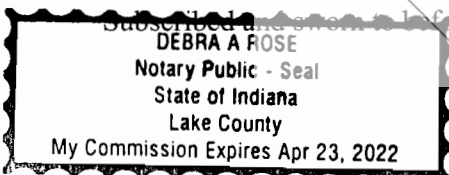
BY: Cheryl Krupa
Cheryl Krupa

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.



Subscribed and sworn to before me, a Notary Public, this 1st day of September, 2015.



Debra A Rose
Cheryl Krupa
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
Earle F. Hites, Attorney at Law
8700 Broadway, Merrillville, IN 46410

7777-205215.002/.003

AMOUNT \$ 12-
CASH _____ CHARGE _____
CHECK # 20490
COVERAGE _____
COPY _____
NON-COM _____
CLERK [Signature]