

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2016 002010

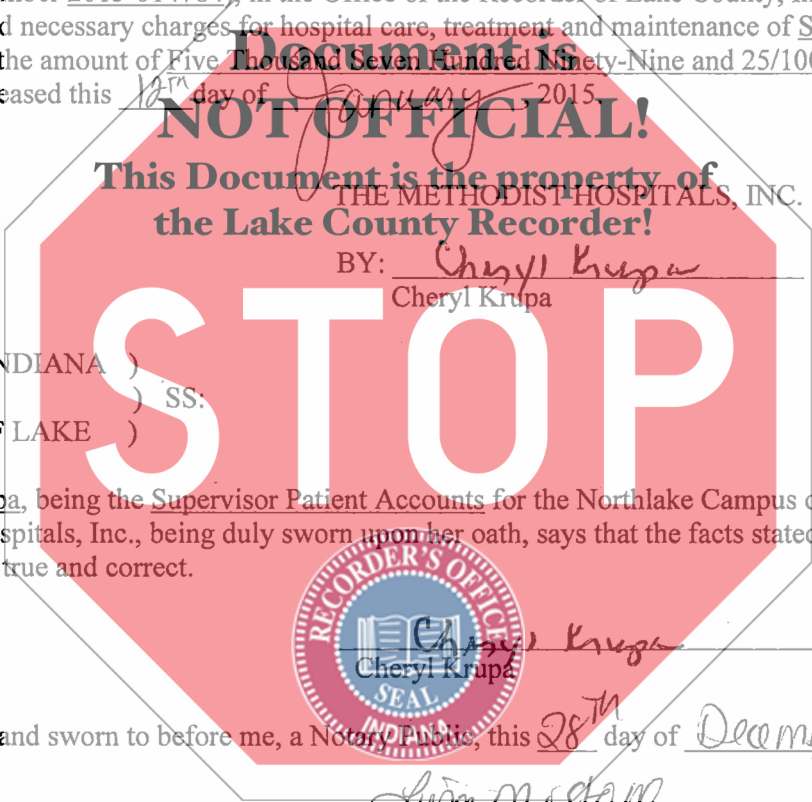
2016 JAN 13 PM 1:12

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 SHERMAINE SHELBY, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 26th day of February, 2015, and recorded on the 17th day of March, 2015 (as instrument number 2015-014784), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of SHERMAINE SHELBY, in the amount of Five Thousand Seven Hundred Ninety-Nine and 25/100 (\$5,799.25) Dollars, is released this 10th day of January, 2015.



STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

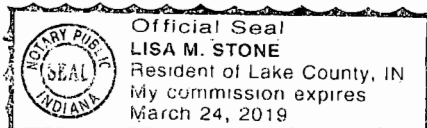
Cheryl Krupa, being the Supervisor Patient Accounts for the Northlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct.

Subscribed and sworn to before me, a Notary Public, this 28th day of December, 2015.

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: [Signature]
Earle F. Hites, Attorney at Law
8700 Broadway, Merrillville, IN 46410

AMOUNT \$ 12⁼
CASH _____ CHARGE _____
CHECK # 20744
OVERAGE _____
COPY _____
NON-COM _____
CLERK [Signature]
E

7777-237633