2016 036792

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2016 JUN 14 PM 12: 39

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 SEAN MEEHAN, represented the 15th day of March, 2016, and recorded on the 18th day of March, 2016 (as instrument number necessary charges for hospital care, treatment and maintenance of SEAN MEEHAN, in the amount of One Thousand Four Hundred Ninety Eight and 250100 (\$1,498.25) Dollars, is released

by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on 2016-016624), in the Office of the Recorder of Lake County, Indiana, for the reasonable and this 131-day of d. The Methodist balance due. In the event full payme Hospitals, Inc. specifical THE METHODIST HOSPITALS, INC Yolanda Jaime STATE OF INDIANA COUNTY OF LAKE Yolanda Jaime, being the Manager 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, Notary Public Kana County A Resident of My Commission Expires: Official Seal LISA M. STONE Resident of Lake County, IN March 24, 2019 (SEAL 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:

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

7777-248699

AMOUNT & CASH. CHECK #209 **OVERAGE** COPY. NON-COM CLERK.