

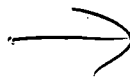
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2016 036796

2016 JUN 14 PM 12:39

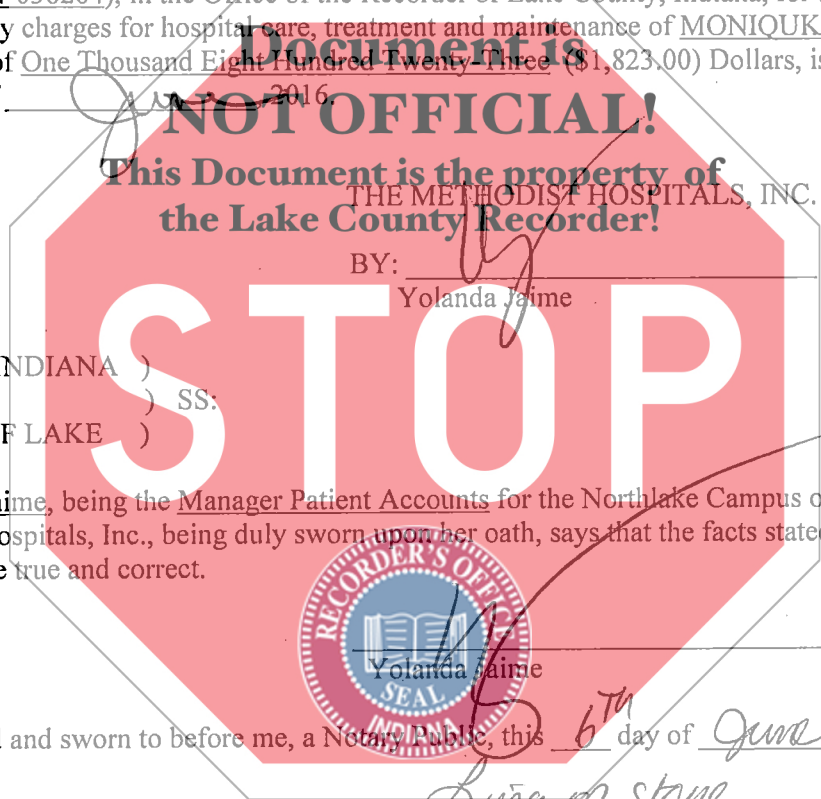
MICHAEL B. BROWN
RECORDER

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 MONIQUK LENOIR, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 3rd day of June, 2014, and recorded on the 3rd day of July, 2014 (as instrument number 2014-038264), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of MONIQUK LENOIR, in the amount of One Thousand Eight Hundred Twenty Three (\$1,823.00) Dollars, is released this 13th day of June, 2016.



STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

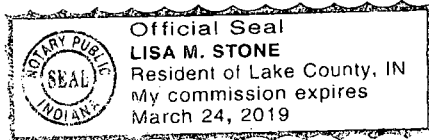
Yolanda Jaime, being the Manager Patient Accounts for the Northlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct.



Subscribed and sworn to before me, a Notary Public, this 6th day of June, 2016.

Lisa M Stone
Notary Public
A Resident of Lane 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: Earle F. Hites
Earle F. Hites, Attorney at Law
8700 Broadway, Merrillville, IN 46410

7777-229350

AMOUNT \$ 12-
CASH _____ CHARGE _____
CHECK # 20983
OVERAGE _____
COPY _____
NON-COM _____
CLERK to
E