

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2016 054879

2016 AUG 11 PM 3:24

MICHAEL B. BROWN
RECORDER

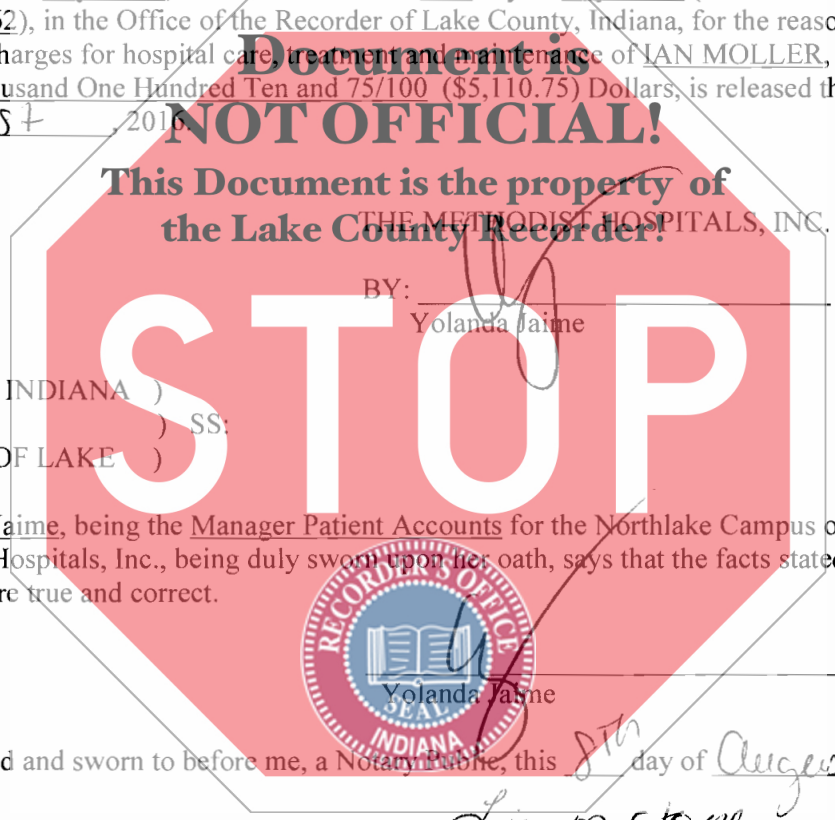
RETURN TO: HODGES & DAVIS, P.C.

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 IAN MOLLER, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 21st day of July, 2015, and recorded on the 29th day of July, 2015 (as instrument number 2015-047262), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of IAN MOLLER, in the amount of Five Thousand One Hundred Ten and 75/100 (\$5,110.75) Dollars, is released this 8th day of August, 2016.



BY: Yolanda Jaime

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.

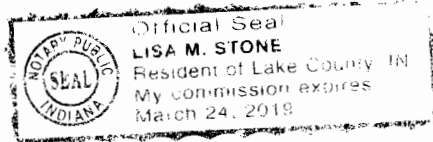


Subscribed and sworn to before me, a Notary Public, this 8th day of August, 2016.

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:

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

#7777-241987

AMOUNT \$ 12-
CASH _____ CHARGE _____
CHECK # 2110
TYPING _____
COPY _____
NON-COM _____
CLERK tw

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