STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2016 AUG 25 PM 2: 30

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., Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against JANICE B MOBLEY, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the $\underline{2nd}$ day of \underline{August} , $\underline{2011}$, and recorded on the $\underline{18th}$ day of \underline{August} , $\underline{2011}$ (as instrument number 2011-044644), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>JANICE B MOBLEY</u>, in the amount of <u>Four Thousand Bight Hundred Seventy</u> (\$4,870.00) Dollars, is released this

In the event full paymer

yed. The Methodist he balance due. Hospitals, Inc. specifical THE METHODIST HOSPITALS, INC. Jaime STATE OF INDIANA COUNTY OF LAKE Yolanda Jaime, being the Manager Patient Accounts for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her eath, says that the facts stated in the foregoing are true and correct. Subscribed and sworn to before me, a Notary Public, this day of (

Notary Public A Resident of Official Seal LISA M. STONE Resident of Lake County, IN My commission extures March 24, 2019

My Commission Expires

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

2222-195525

AMOUNT \$ CASH. CHECK# **OVERAGE** COPY. NON-COM CLERK_