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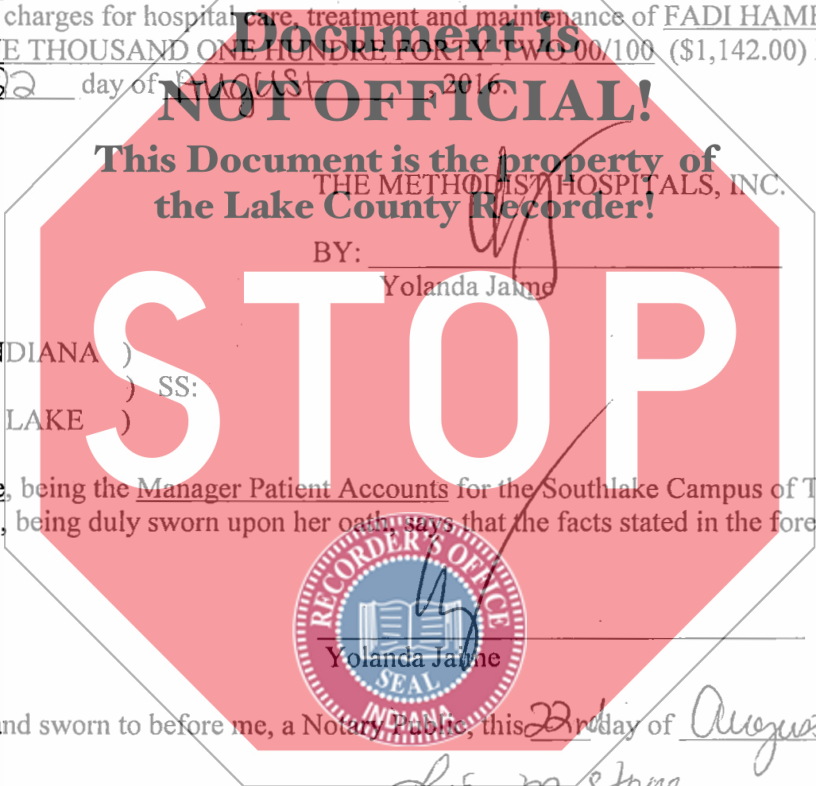
2016 AUG 25 PM 2:30

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 FADI HAMED, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 7th day of July, 2011, and recorded on the 22nd day of July, 2011 (as instrument number 2011-039775), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of FADI HAMED, in the amount of ONE THOUSAND ONE HUNDRE FORTY TWO 00/100 (\$1,142.00) Dollars, is released this 22 day of AUGUST, 2016.



STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

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



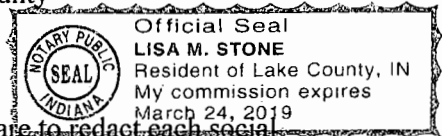
Subscribed and sworn to before me, a Notary Public, this 22nd day of August, 2016.

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

2222-194920

AMOUNT \$ 12-
CASH _____ CHARGE _____
CHECK # 2114
OVERAGE _____
COPY _____
NON-COM _____
CLERK JAB

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