FILED FOR RECORD

2017 000896

2017 JAN -5 AM 10: 25

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 DON-L THOMPSON, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 24th day of March, 2013, and recorded on the 19th day of April, 2013 (as instrument number 2013-028234), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of DON-L THOMPSON, in the amount of One Thousand Four Hundred Seventy-Three and 25/100 ($1,473.25) Dollars, is released this 28th day of December, 2016.

Document is NOT OFFICIAL!
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STOP
RECORDER'S OFFICE SEAL INDIANA

THE METHODIST HOSPITALS, INC.

BY: _____
Yolanda Jaime

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.

_____
Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 28th day of December, 2016.

_____
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

#2222-214408

AMOUNT $ 12-
CASH _____ CHARGE _____
CHECK # 21371
OVERAGE _____
COPY _____
NON-COM _____
CLERK _____

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