

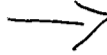
2017 020607

2017 MAR 31 AM 11:05

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 LASONYA WARD, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 24th day of October, 2016, and recorded on the 17th day of November, 2016 (as instrument number 2016-078078), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of LASONYA WARD, in the amount of Forty Seven Thousand Three Hundred Ninety Four and 30/100 (\$47,394.30) Dollars, is released this 24th day of March, 2017.

In the event full payment of the hospital charges has not been received, The Methodist Hospitals, Inc. specifically reserves all rights it may have to collect the balance due.

**Document is NOT OFFICIAL!**  
**This Document is the property of the Lake County Recorder!**

THE METHODIST HOSPITALS, INC.

BY: [Signature]  
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.



Subscribed and sworn to before me, a Notary Public, this 31st day of March, 2017.  
DEBRA A ROSE  
Notary Public - Seal  
State of Indiana  
Lake County  
My Commission Expires Apr 23, 2022

[Signature]  
Notary Public  
A Resident of Lake County

My Commission Expires: April 23, 2022

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: [Signature]  
Earle F. Hites, Attorney at Law  
8700 Broadway, Merrillville, IN 46410

#7777-255282

AMOUNT \$ 12-  
CASH \_\_\_\_\_ CHARGE \_\_\_\_\_  
CHECK # 21544  
OVERAGE \_\_\_\_\_  
COPY \_\_\_\_\_  
NON-COM \_\_\_\_\_  
CLERK [Signature]

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