STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 043873

2017 JUL 18 PM 1:10

MICHAEL B. BROW

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 <u>KIMBERLY YATSKO</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was ıe

	executed on the 23rd day of May, 2017, and recorded on the 20th day of June, 2017 (as
	instrument number 2017-037509), in the Office of the Recorder of Lake County, Indiana, for the
	reasonable and necessary charges for hospital care, treatment and maintenance of <u>KIMBERLY</u>
	YATSKO, in the amount of Six Thousand Three Hundred Forty Eight and 40/100 (\$6,348.40)
	Dollars, is released this / July of Cally T. 2017.
	AUI PITIOIAL:
	In the event full pay hent of the hospital charges thas not been received fine Methodist
	Hospitals, Inc. specifically reserves all rights it may have to collect the balance due.
	THE METHODIST HOSPITALS, INC.
	BY: VV
	Yolanda Jaime
	CTATE OF DIDIANIA
	STATE OF INDIANA) SS:
	COUNTY OF LAKE
	COUNTY OF LAKE
	Yolanda Jaime, being the Manager Patient Accounts for the Southlake Campus of The
	Methodist Hospitals, Inc., being duly sworn upon her cath, says that the facts stated in the
	foregoing are true and correct.
	Youanda Jaime
*	Subscribed and sworn to before me, a Notary Public, this day of flag, 2017.
4	DEBRA A ROSE
1	Notary Public - Seal State of Indiana Notary Public
9	Lake County A Resident of County
L	My Commission Expires Apr 23, 2022
	147 (127, WV
	11/5/10/10
	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 062020
	#7777-263230
	AMOUNT S _ 25 -
	CASHCHARGE
	CHECK #
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CLERK.....