STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 043878

2017 JUL 18 PH 1: 1"

MICHAEL B. BROWN RECORDER

RETURN TO: HODGES & DAVIS, P.C.

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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., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against SUSAN MOLENAAR, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 15th day of February, 2017, and recorded on the 17th day of February, 2017 (as instrument number 2017-010521), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of SUSAN MOLENAAR, in the amount of Twenty One Thousand Four Hundred Forty-Nine and 90/100 (\$21,449.90) Dollars, is released this 14th day of 15th day of 15t

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.

THE METHODIST HOSPITALS, INC.

BY:
Yolanda Jaime

STATE OF INDIANA

SS:

COUNTY OF LAKE

Yolanda Jaime, being the Manager Patient Accounts for the Northlake Campus of

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

Woland Jaime

Subscribed and sworn to before me, a Notary Public, this day of fulfy, 2017.

DEBRA A ROSE

Notary Public - Seal

State of Indiana

Lake County

My Commission Expires Apr 23, 2022

My Columnission Expires Apr 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:

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

#7777-259336

AMOUNTS 25CASH. CHARGE
CHECK # 2/762 E
OVERAGE
OOPY.
NON-COM Q-A