

2017 046436

2017 JUL 26 PM 1:14

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 AYANA WITHERSPOON, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 21st day of June, 2017, and recorded on the 30th day of June, 2017 (as instrument number 2017-040720), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of AYANA WITHERSPOON, in the amount of Five Hundred Twenty Three and 98/100 (\$523.98) Dollars, is released this 26th day of July, 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.

THE METHODIST HOSPITALS, INC.

BY: Yolanda Jaime

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

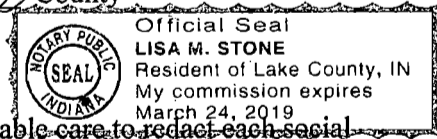
Yolanda Jaime, being the Manager Patient Accounts for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct.



Subscribed and sworn to before me, a Notary Public, this 20th day of July, 2017.

Lisa M Stone
Notary Public
A Resident of Deane 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

#7777-264564

AMOUNT \$ 25-
CASH CHARGE
CHECK # 21785
OVERAGE
COPY
NON-COM
CLERK JTB

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