STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 046439

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 EVELYN D ADKINS,

represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 18th day of November, 2016, and recorded on the 20th day of December, 2016 (as instrument number 2016-086177), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of EVELYN D ADKINS, in the amount of Five Thousand Wine Hundred Ninety Two and 41/100 (\$5992.41) Dollars, is released this 20-In the event full payment of eived. The Methodist the balance due. Hospitals, Inc. specifically the Lake Count THE METHODIST HOSPITALS, INC. Yolanda Jai STATE OF INDIANA COUNTY OF LAKE Yolanda Jaime, being the Manager Patient Accounts for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her capi, says that the facts stated in the foregoing are true and correct. Subscribed and sworn to before me, a Notary Public, this 2017. 111/19 **Notary Public** A Resident of Official Seal My Commission Expires LISA M. STONE (SEAL) Resident of Lake County, IN My commission expires (M) I affirm, under the penalties for perjury, that I have taken reasonable care to reglaci 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

#7777-255717

AMOUNT \$ CASH_ CHECK# OVERAGE! COPY. NON-COM. CLERK.