

2017 082851

2017 DEC -6 PM 1:15

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 AVA L BROWN, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 22nd day of April, 2011, and recorded on the 18th day of May, 2011 (as instrument number 2011-027799), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of AVA L BROWN, in the amount of Two Thousand Four Hundred Thirty Five (\$2,435.00) Dollars, is released this 27th day of November, 2017.



BY: [Signature]  
Yolanda Jaime

STATE OF INDIANA )  
                          ) SS:  
COUNTY OF LAKE )

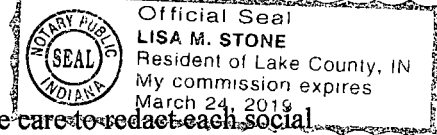
Yolanda Jaime, being the Manager Patient Accounts for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct.



Subscribed and sworn to before me, a Notary Public, this 27th day of November, 2017.

[Signature]  
Notary Public  
A Resident of Lake 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: [Signature]  
Earle F. Hites, Attorney at Law  
8700 Broadway, Merrillville, IN 46410

#7777-192743.001

AMOUNT \$ 25-  
CASH \_\_\_\_\_ CHARGE \_\_\_\_\_  
CHECK # 22055 E  
OVERAGE \_\_\_\_\_  
COPY \_\_\_\_\_  
NON-COM \_\_\_\_\_  
CLERK JAS