

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2017 082859

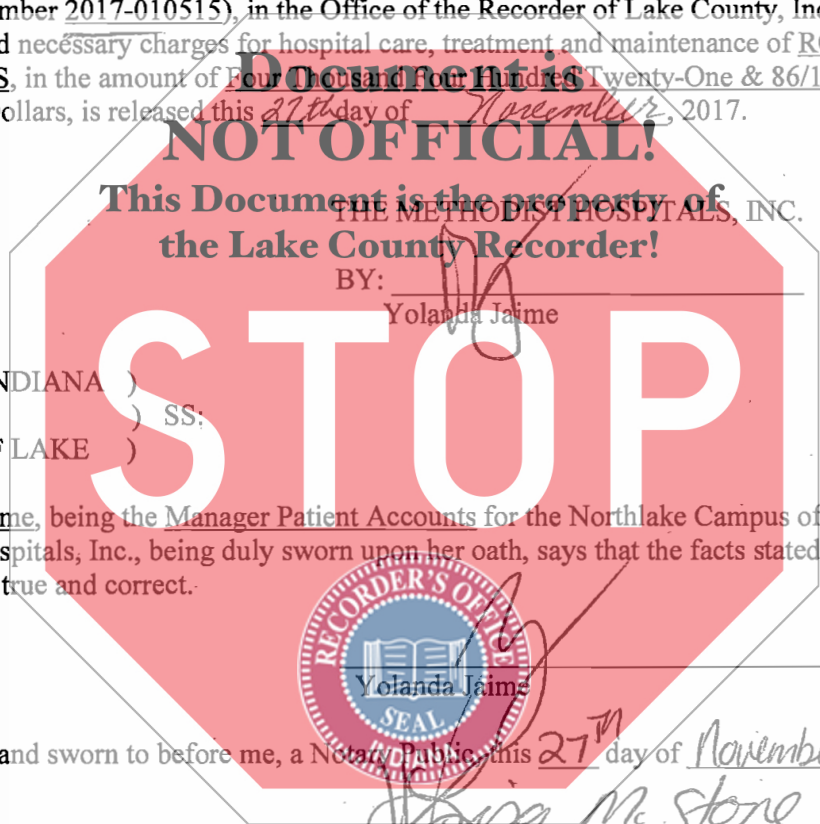
2017 DEC -6 PM 1:15

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., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against ROCIO CONTRERAS, 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 2017-010515), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of ROCIO CONTRERAS, in the amount of Four Thousand Four Hundred Twenty-One & 86/100 (\$4,421.86) Dollars, is released this 27th day of November, 2017.



STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

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.

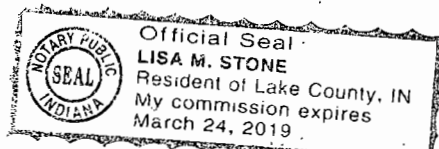


Subscribed and sworn to before me, a Notary Public, this 27th day of November, 2017.

Lisa M. Stone
Notary Public
A Resident of Lane 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

#7777-259325

AMOUNT \$ 25-
CASH CHARGE
CHECK # 22055
OVERAGE _____
COPY _____
NON-COM _____
CLERK [Signature]

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