STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 087166

2017 DEC 26 PH 3: 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., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against WESLEY BARNES, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 15th day of August, 2017, and recorded on the 25th day of August, 2017 (as instrument number 2017-057705), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of WESLEY BARNES, in the amount of Nineteen Thousand Six Hundred Sixty One and 60/100 (\$19,661.60) Dollars, is released this

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 Lake County Recorder!

THE METHODIST HOSPITALS, INC.

BY:
Yolanda Jaime

STATE OF INDIANA

SS;
COUNTY OF LAKE

Yolanda Jaims, 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 May of May 17

DEBRA A ROSE
Notary Public - Seal
State of Indiana
Lake County
My Commission Expires Are 183 2008:

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

#7777-266379

MOUNT OF 25 - CHARGE THE CHARGE DOPY.
NON-COM. OF EDIT