

2019-083203

2019 Dec 3

2:21 PM

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
MICHAEL B BROWN  
RECORDER

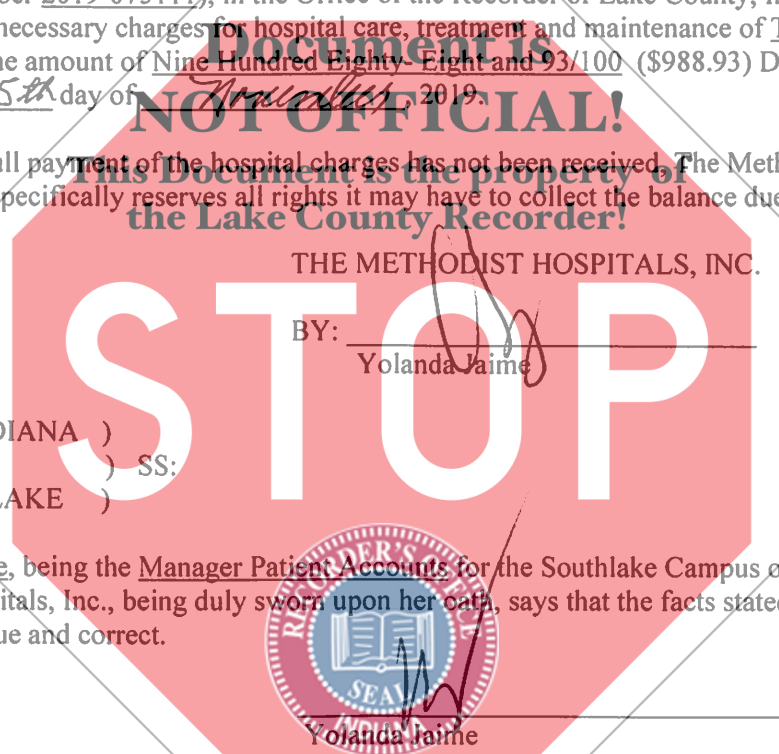


RETURN TO: HODGES & DAVIS, P.C.  
Attorneys at Law  
8700 Broadway  
Merrillville, IN 46410

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 TANYA MALONE, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 21st day of October, 2019, and recorded on the 31st day of October, 2019 (as instrument number 2019-075111), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of TANYA MALONE, in the amount of Nine Hundred Eighty-Eight and 93/100 (\$988.93) Dollars, is released this 25th day of November, 2019.

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.

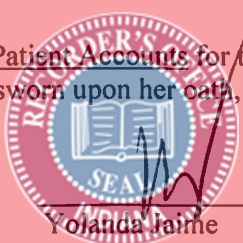


THE METHODIST HOSPITALS, INC.

BY: Yolanda Jaime

STATE OF INDIANA )  
                                  ) SS:  
COUNTY OF LAKE )

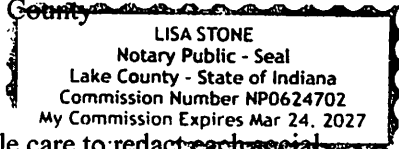
Yolanda Jaime, being the Manager Patient Accounts for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct.



Subscribed and sworn to before me, a Notary Public, this 25th day of November, 2019.

Lisa Stone  
Notary Public  
A Resident of Dea County

My Commission Expires: March 24, 2027



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: Gregory A. Sobkowski  
Gregory A. Sobkowski, Attorney at Law  
8700 Broadway, Merrillville, IN 46410

#7777-294531

AMOUNT \$ 25-  
CASH \_\_\_\_\_ CHARGE \_\_\_\_\_  
CHECK # 23913  
OVERAGE \_\_\_\_\_ E  
COPY \_\_\_\_\_  
NON-COM \_\_\_\_\_  
CLERK [Signature]