NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL
RECORDER
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2023-005630

3:22 PM 2023 Feb 15

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 ROBERTA S RAMIREZ, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 29th day of October, 2021, and recorded on the 18th day of November, 2021 (as instrument number 2021-067924), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of ROBERTA S RAMIREZ, in the amount of One Thousand Seven Hundred Forty One ($1,741.00) Dollars, is released this 8th day of February, 2023.

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: _____
Anthony Dowdell

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Anthony Dowdell, 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.

_____
Anthony Dowdell

Subscribed and sworn to before me, a Notary Public, this 8th day of February, 2023.

DEBRA A ROSE
Notary Public - Seal
Lake County - State of Indiana
Commission Number NP0653049
My Commission Expires Apr 23, 2030

_____
Notary Public

A Resident of Lake County

My Commission Expires: April 23, 2030

My Commission Number: NP0653049

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: _____
Laura B. Frost, Attorney at Law
8700 Broadway, Merrillville, IN 46410

#7777-313369

AMOUNT 25-
CASH ____ CHARGE ____
CHECK # 21574
OVERAGE ____
COPY ____
NON-COM ____
CLERK ____

Property of Lake County Recorder