NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED

2023-033261

1:32 PM 2023 Dec 6

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 JANEL POLSTER. represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 18th day of August, 2022, and recorded on the 29th day of August, 2022 (as instrument number 2022-031376), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of JANEL POLSTER, in the amount of One Thousand Seven Hundred Seventy One (\$1,771.00) Dollars, is released this 300 day of NORTH 1000 Dollars, is 2023.

(V ₄
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: Demo
Yolanda Taime
STATE OF INDIANA) SS:
COUNTY OF LAKE) 33.
0/
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.
Yolanda Jaime
Subscritised was Discount to be ore me, a Notate Public, with May for West March
take County - State of Indiana
Commission Number NP0653049
Notary Public Resident of County
My Commission Expires: My Commission Number:
149×11012030
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 & French
Laura B. Frost, Attorney at Law
8700 Broadway, Merrillville, IN 46410

2222-322165

AMOUNT CHARGE
CASH CHECK # 28 66 9

OVERAGE
COPY NON-COM
CLERK Y