NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL
RECORDER
STATE OF INDIANA
LAKE COUNTY
RECORDED AS PRESENTED

2023-033262

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., Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against AUSTYN T ZART, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 21st day of July, 2021, and recorded on the 13th day of August, 2021 (as instrument number 2021-054966), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of AUSTYN T ZART, in the amount of Five Hundred Twenty ($520.00) Dollars, is released this 22nd day of November, 2023.

THE METHODIST HOSPITALS, INC.

BY: Yolanda Jaime
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.

Yolanda Jaime
Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 22nd day of November, 2023.

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

Debra A Rose
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
Laura B. Frost, Attorney at Law
8700 Broadway, Merrillville, IN 46410

7777-308682

AMOUNT 25.-
CASH CHARGE
CHECK # 28669
OVERAGE
COPY
NON-COM
CLERK CM

Property of Lake County Recorder