NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED 2024-030150

2024 Oct 17 9:23 AM

> 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 JEFFREY REEVES, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 15th day of September, 2022, and recorded on the 21st day of September, 2022 (as instrument number 2022-034260), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of JEFFREY

REEVES, in the amount of Two Thousand Four Hundred Eighty Nine & 25/100 (\$2489.25)
Dollars, is released this St day of Dursu, 2024.
9
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.
al library inc.
BY: JULY (204) ONLY
Debra Bergonia
OTTATE OF BUDIANA
STATE OF INDIANA)) SS:
COUNTY OF LAKE)
, ,
Debra Bergonia, being the Manager Credit and Collections 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.
Labour / Leveryower
Debra Bergonia
The A . I
Subscribed and sworn to before me, a Notary Public, this The day of October, 2024.
de la Chara
Notary Public
A Resident of County
My Commission Expires: My Commission Number: NP 06 2 4 702
March 24, 2027
LISA STONE
Notary Public - Seal Lake County - State of Indiana Commission
affirm, under the penalties for perjury, that I have taken reasonable tare to reday the second
security number in this document, unless required by law.
This instrument Prepared By: Faura Free
Laura B. Frost, Attorney at Law
8700 Broadway, Merrillville, IN 46410

7777-322699

AMOUNT_	25-
CASH	CHARGE
CHECK #_	29358
OVERAGE	
COPY	
NON-COM	
CLERK	α