

GINA PIMENTE
RECORDER
STATE OF INDIANA
LAKE COUNTY
RECORDED AS PRESENTED

2024-030796
2:35 PM 2024 Oct 28

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 LORI MENDOZA, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 14th day of October, 2022, and recorded on the 27th day of October, 2022 (as instrument number 2022-036930), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of LORI MENDOZA, in the amount of One Thousand Nineteen & 50/100 (\$1,019.50) Dollars, is released this 10th day of October, 2024.

THE METHODIST HOSPITALS, INC.
BY: Debra Bergonia
Debra Bergonia

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

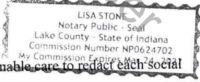
Debra Bergonia, being the Manager Credit and Collections for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct.

Debra Bergonia
Debra Bergonia

Subscribed and sworn to before me, a Notary Public, this 21st day of October, 2024.

Ruby Stone
Notary Public
A Resident of Lake County
My Commission Number: NP0624702

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

7777-323479

AMOUNT 25-
CASH _____ CHARGE _____
CHECK # 29383
OVERAGE _____
COPY _____
NON-COM _____
CLERK DA