L DOCUMENT RECORDER

STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED

2024 Oct 28 2:35 PM

> 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 Chris Rehtorik, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 29TH day of JULY, 2024, and recorded on the 20TH day of AUGUST, 2024 (as instrument number 2024-021766), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Chris Rehtorik, in the amount of THREE THOUSAND ONE HUNDRED AND ONE DOLLAR 75/100

(\$3101.75) Dollars, is released this Not day of Utyles , 2024.
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: Debra Bergonia
STATE OF INDIANA)
) SS:
COUNTY OF LAKE)
0,
<u>Debra Bergonia</u> , being the <u>Manager Credit and Collections</u> 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.
Debra Bergonia
Subscribed and sworn to before me, a Notary Public, this 2 15 day of 2 2024.
Bung Stone
Resident of Sull County
My Commission Expires: My Commission Number:
VV QACO 24, 2021 ILSASTONE Notary Public - Soal Lake County- State of Indiana Commission Number RIPEC 2700 My Commission Number RIPEC 270, 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: Facura (2. for
Laura B. Frost, Attorney at Law 8700 Broadway, Merrillville, IN 46410

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