S IN OF INDIANA HAVE COUNTY FILED FOR PLECCHD

2004 035924

RETURN TO:

HODĞES & 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., Outpatient - Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against SANDRA FRANKLIN, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 25th day of April, 2001, and recorded on the 11th day of May, 2001 (as instrument number 2001-036169), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of SANDRA FRANKLIN, in the amount of Nine Hundred Twenty and 29/100 (\$920.29) Dollars, is released this 39th day of 1001 (\$920.29) Dollars, is released this 39th day

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 Lake County RTHE METHODIST HOSP TALS, INC. Jaime

STATE OF INDIANA

SS:

COUNTY OF LAKE

Yolanda Jaime, being the <u>Service Unit Manager</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.

Youanda Subscribed and sworn to before me, a

Notary Public, this 29th day of

Hpril , 2004.

A Resident of Aake

Notary Public County

My Commission Expires:

Miarch 24, 2011

This instrument Prepared By: Clyde D. Compton, Attorney at Law 8700 Broadway, Merrillville, IN 46410



(1/2 1/507)