

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2004 040114

2004 MAY 14 PM 3:51

MORRIS W. MASTER  
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., Outpatient - Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against Sandra Wilson Guarantor For AMANDA WILSON, represented by the Sworn Statement Of Intention To Hold Hospital Lien which was executed on the 26th day of September, 2003, and recorded on the 21st day of October, 2003 (as instrument number 2003-112939), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of AMANDA WILSON, in the amount of Five Hundred Fifty Eight and 00/100 (\$558.00) Dollars, is released this 10th day of May, 2004.

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: Yolanda Jaime  
Yolanda Jaime

STATE OF INDIANA )  
                          ) SS:  
COUNTY OF LAKE )

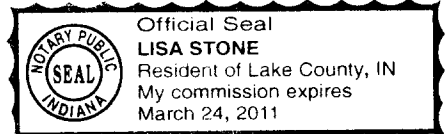
Yolanda Jaime, being the Service Unit Manager for The Methodist Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct.

Yolanda Jaime  
Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 10th day of May, 2004.

Lisa Stone  
Notary Public  
A Resident of Lake County

My Commission Expires:  
May 24, 2011



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

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