STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2004 040128

2004 MAY 14 PH 3:52

MORRSRETURN 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 LATANYA REDMOND, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 12th day of February, 2003, and recorded on the 24th day of February, 2003 (as instrument number 2003-019377), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of LATANYA REDMOND, in the amount of Two Thousand One Hundred Fifty Eight and 00/100 (\$2,158.00) Dollars, is released this 10th day of 7000/100 7000/1000.

In the event full payment of the hospital charges has not been received, The Methodist Hospitals, Inc. specificalfy reserves all rights it may have to collect the balance due.

THE METHODIST HOSPITALS, INC.

BY: Yolanda Jaime OCW

STATE OF INDIANA

COUNTY OF LAKE

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

SS:

Yolanda Jaime

e me, a Notary Public, this () day of

Subscribed and sworn to before me, a Notary Public, this 10 day of

Notary Public A Resident of St. County

My Commission Expires:

3 24.04

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

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