

OFFICE OF RECORDER  
LAKE COUNTY  
FILED FOR RECORD

2004 044127

2004 MAY 26 PM 2:17

MOREL  
REC'D

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 - Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against CHERYL MCCLAINE, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 28th day of January, 1999, and recorded on the 2nd day of February, 1999 (as instrument number 99008372), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of CHERYL MCCLAINE, in the amount of Four Thousand Two Hundred Fifteen and XX/100 (\$4,215.00) Dollars, is released this 21st 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

STATE OF INDIANA )  
                          ) SS:  
COUNTY OF LAKE )

Yolanda Jaime, being the Service Unit Manager 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.

Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 21st day of May, 2004.

Sheri Lopez  
Notary Public  
A Resident of Lake County

My Commission Expires:

March 24, 2011



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

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