

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2004 051253

2004 JUN 18 AM 9:38

MORRIS V. BIER
RECORDER

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 BARBARA WILCHER, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 12th day of April, 2004, and recorded on the 27th day of April, 2004 (as instrument number 2004-034222), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of BARBARA WILCHER, in the amount of One Thousand Twenty Nine and 00/100 (\$1029.00) Dollars, is released this 3rd day of June, 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: [Signature]
Yolanda Jaime

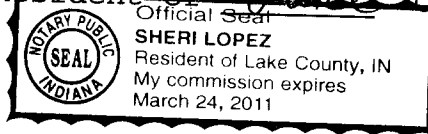
STATE OF INDIANA)
COUNTY OF LAKE) SS:

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.

[Signature]
Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 3rd day of June, 2004.

[Signature]
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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