2004 093919

STATE_OF_INDIANA LAKE COUNTY FILED FOR RECORD

2004 NOY -3 PM 3: 19

MORRIS W. CAR RECURETURN 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 CHARLES LOWERY, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 30th day of December, 2003, and recorded on the 22nd day of January, 2004 (as instrument number 2004-006187), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for

hospital care, treatment and maintenance of CHARLES LOWERY, in the amount of One Thousand Four and 91/100 (\$1,004.91) Dollars, is released this 29th day of Octaber , 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 property of the Lake County THE METHODIST HOSPITALS, INC. 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 daly sworn upon her oath, says that the facts stated in the foregoing are true and correct. Jaime Subscribed and sworn to before me, a Notary , 2004. Public, this day of Notary Public A Resident of My Commission Expires: Official Seal march 24,2011 LISA STONE Resident of Lake County, IN My commission expires (SEAL)

March 24, 2011 Law This instrument Prepared By: Clyde D. Compton, 8700 Broadway, Merrillville, IN 46410

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