

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2005 001093

2005 JAN -6 PM 3:08



MICHAEL A. HEDGECOCK

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 GWENDOLYN A. RAYFORD, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 30th day of June, 2004, and recorded on the 21st day of June, 2004 (as instrument number 2004-061575), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of GWENDOLYN A. RAYFORD, in the amount of Eight Hundred Sixteen and 00/100 (\$816.00) Dollars, is released this 4th day of January, 2005.

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 )  
                          ) 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.

[Signature]  
Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 4 day of January, 2004.5

[Signature]  
Notary Public  
A Resident of Ind. County

My Commission Expires:  
2-24-08

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

#10-  
CK#120162  
[Signature]