STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2005 MAR 18 PM 2:23

MICHAEL A. BROWN
RECORDER

2005 021192

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 SANTINA S. EDGERTON, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 29th day of October, 2003, and recorded on the 17th day of November, 2003 (as instrument number 2003-122298), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of SANTINA S. EDGERTON, in the amount of Two Thousand Eighteen and 05/100 ($2,018.05) Dollars, is released this 15th day of March, 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: 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 15th day of March, 2005.

Lisa Stone
Notary Public
A Resident of Lake County

My Commission Expires:

March 24, 2011

Official Seal
LISA STONE
Resident of Lake County, IN
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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CK#12208
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