

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2005 082670

2005 SEP 21 AM 9:42

RECORDERS OFFICE
MICHAEL A. BROWN
RECORDER

RETURN TO: HODGES & DAVIS, P.C.
Attorneys at Law
8700 Broadway
Merrillville, IN 46410

RELEASE OF HOSPITAL LIEN

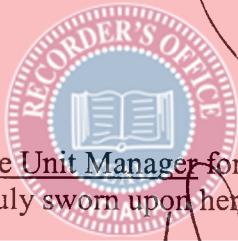
This is to certify that a certain Hospital Lien by THE METHODIST HOSPITALS, INC., Outpatient - Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against ARIANA FRANKS, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 18th day of May, 2005, and recorded on the 15th day of June, 2005 (as instrument number 2005-049405), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of ARIANA FRANKS, in the amount of Seven Thousand Six Hundred Sixty and 00/100 (\$7660.00) Dollars, is released this 13th day of September 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)



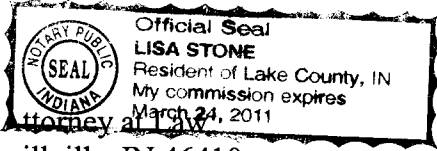
Yolanda Jaime, being the Service Unit Manager for the Northlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her oath, says that the facts stated in the foregoing are true and correct.

[Signature]
Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 13th day of September 2005.

[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

1510 -
CL # 10603
Caw