


STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2006 025600

2006 MAR 29 AM 9:46

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 RACHEL L. WILLIAMS, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 28th day of September, 2004, and recorded on the 7th day of October, 2004 (as instrument number 2004-086291), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of RACHEL L. WILLIAMS, in the amount of Four Thousand Four Hundred Eighty Five and 00/100 (\$4485.00) Dollars, is released this 21st day of March, 2006.

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.

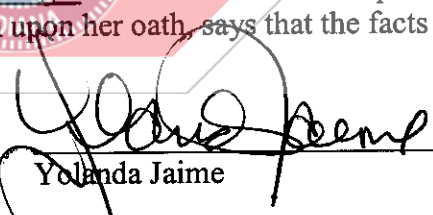
BY:


Yolanda Jaime

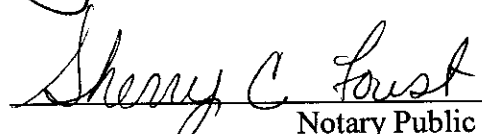
STATE OF INDIANA)
) SS:
COUNTY OF LAKE)



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 21 day of March, 2006.


Notary Public
A Resident of LAKE County

My Commission Expires:
OCTOBER 10, 2013



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

#10-07
CK #10083