STATE OF INDIA! FILED FOR RECORD

2006 071012

2006 AUG 15 AM N 06

RETURN TO: HODGES & DAVIS, P.C.

RECU 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 GENYLL <u>HUNT</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 9th day of May, 2006, and recorded on the 26th day of May, 2006 (as instrument number 2006-045358), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of GENYLL HUNT, in the amount of Three Thousand Eight Hundred Fifty Three and 00/100 (\$3853.00)

Dollars, is released this 8th day of Quality 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 HOSP Yolanda Jaime STATE OF INDIANA 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. olanda Jaime Subscribed and sworn to before me, a Notary Public, this Notary Public A Resident of Man County My Commission Expires: Official Seal LISA STONE March 24,2011 Resident of Lake County, IN My commission expires March 24, 2011 I affirm, under the penalties for perjuty, that I have e taken reasonable care to redact each social security number in this document, unless required by law. This instrument Prepared By Clyde D. Compton, Attorney at Law 8/100/Broadway, Merrillville, IN 46410