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MICHAE

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 RONALD D. BYRD SR., represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 9th day of April, 2004, and recorded on the 23rd day of April, 2004 (as instrument number 2004-033269), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of RONALD D. BYRD SR., in the amount of One Thousand Two Hundred Forty and 00/100 (\$1240.00) Dollars, is released this 2nd day of OCTO DER

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. STATE OF INDIANADE Lake County COUNTY OF LAKE Yolanda Jaime, being the Service Unit Manager for the Northlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her dath, says that the facts stated in the foregoing are true and correct. olanda Jaime day of October Subscribed and sworn to before me, a Notary Public, this Notary Public A Resident of Full County My Commission Expires: Official Seal March 24, 201 LISA STONE Resident of Lake County, IN My commission expires March 24, 2011 I affirm, under the penalties for perfury, that I have taken reasonable care to redact each social security number in this document, unless required by

This instrument Prepared By:

Clyde N. Compton, Attorney at Law 8700 Broadway, Merrillville, IN 46410

> RECEIVED HODGES & DAVIS, P.O 1001 3 4 2006