STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2007 027781

2337/1572 - 4 871 1: 44

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 - Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against HILTON ROGERS, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 31st day of March, 2004, and recorded on the 8th day of April, 2004 (as instrument number 2004-028895), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of HILTON ROGERS, in the amount of One Thousand Nine Hundred Thirty Nine and 00/100 (\$1939.00) Dollars, is released this 5th day of May of May 0.2007.

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.
This Documery Yolanda Jaime
state of Indiana )  SS:  SS:
COUNTY OF LAKE )
Yolanda Jaime, being the Service Unit Manager for the Southlake 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 5th day of March, 2007.
A Resident of Kahu County  Notary Public
My Commission Expires:  A Resident of Salu County
My Commission Expires:  Mach 24, 2011  Official Seal  LISA STONE  Resident of Lake County, IN  My commission expires
I affirm, under the penalties for perjury/that I have taken reasonable care to redact each social
This instrument Prepared By:
Clyde D. Compton, Attorney at Law