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STATE OF INDIANA
LAKE COURTS
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RETURN FO. 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., Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against <u>LAURIE E. LINCOLN</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the <u>20th</u> day of <u>February</u>, 2007, and recorded on the <u>23rd</u> day of <u>March</u>, 2007 (as instrument number <u>2007-024499</u>), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>LAURIE E. LINCOLN</u>, in the amount of <u>Fifty Thousand Four Hundred Seventy One and 00/100</u> (\$50471.00) Dollars, is released this bh day of <a href="mailto:mai

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. This Document Yolanda Jaime ro STATE OF INDIANAL Lake County 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. Subscribed and sworn to before me, a Notary Public, this 15' Notary Public A Resident of Jake County Official Seal My Commission Expires: LISA STONE march 24,2011 Resident of Lake County, IN My commission expires March 24, 2011 I affirm, under the penalties for perjury, that I have taken reasonable care to redact each social security number in this document, unless required by la This instrument Prepared By: Clyde D. Compton, Attorney at Law

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