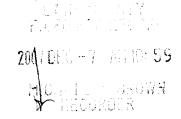
2007 096171



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., Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against Kerry Highsmith Sr. Guarantor For KERRY S. HIGHSMITH JR., represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 17th day of August, 2007, and recorded on the 31st day of August, 2007 (as instrument number 2007-070952), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of KERRY S. HIGHSMITH JR., in the amount of Seven Hundred Forty One and 00/100 (\$741.00) Dollars, is released this 20th day of 1000 Ember 12007.

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 Documert is the ward   |
| the Lake County Recorder!   |
| STATE OF INDIANA ) ) 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 path, 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 November, 2007.  |
| A Resident of Airl County Notary Public   |
| My Commission Expires:  My Commission Expires:  Official Seal LISA STONE Resident of Lake County, IN My commission expires  |
| I affirm, under the penalties for perjuty, that have taken reasonable care to reduct each social security number in this document, unless required by law                                     |
| This instrument Prepared By:  Clyde D. Compton, Attorney at Law   |
| 8700 Byoadway, Merrillville, IN 46410   |