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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 COLYN HAMBLET, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 23rd day of February, 2006, and recorded on the 9th day of March, 2006 (as instrument number 2006-019768), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of COLYN HAMBLET, in the amount of One Thousand Three Hundred Sixty Three and 00/100 (\$1363.00) Dollars, is released this 19th day of 1000 cm 1000.

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 STATE OF INDIANA Lake County SS: COUNTY OF LAKE Yolanda Jaime, being the Service Unit Manager for the Northlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her path, says that the facts stated in the foregoing are true and correct. Subscribed and sworn to before me, a Notary Public, this 19 day of November 2007. Notary Public A Resident of My Commission Expires: Official Seal 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

By: Clyde D. Compton, Attorney at Law

This instrument Prepared By:

security number in this document, unless required by law

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

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