STATE OF IMBIANA LAKE COUNTY FILED FOR RECORD

2007 100077

2007 DEC 21 PM 2: 48
MICHAEL A. BROWN
RECORDER

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 <u>DIMITRIJA</u> <u>RADICESKI</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the <u>13th</u> day of <u>June, 2007</u>, and recorded on the <u>27th</u> day of <u>June, 2007</u> (as instrument number <u>2007-052170</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>DIMITRIJA RADICESKI</u>, in the amount of <u>Six Thousand One and 00/100</u> (\$6001.00) Dollars, is released this ICD day of <u>DECEMBER</u>, 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.

This Document Yolanda Jamero STATE OF INDIANA Lake County Recorder!) 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 Jain Subscribed and sworn to before me, a Notary Public, this 10 day of 12 center, 2007. Notary Public A Resident of Fahi County My Commission Expires: Official Seal March 24,2011 LISA STONE Resident of Lake County, IN aken reasonable care witedact each social xpires I affirm, under the penalties for perjury, that have security number in this document, unless required by law. Chite H4103 This instrument Prepared By: Clyde D. Compton, Attorney at Law

870 Broadway, Merrillville, IN 46410

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