

2007 100097

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2007 DEC 21 PM 2:49

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 YOLANDA RAMIREZ, represented by the Sworn Statement Of Intention To Hold Hospital Lien which was executed on the 9th day of February, 2007, and recorded on the 23rd day of March, 2007 (as instrument number 2007-024503), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of YOLANDA RAMIREZ, in the amount of Thirty Five Thousand Eight Hundred Sixty and 63/100 (\$35860.63) Dollars, is released this 10th day of DECEMBER, 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.

BY: [Signature]  
Yolanda Jaime

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 oath, says that the facts stated in the foregoing are true and correct.

[Signature]  
Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 10<sup>th</sup> day of December, 2007.

[Signature]  
A Resident of Indiana County

Notary Public

My Commission Expires:  
March 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 security number in this document, unless required by law.

This instrument Prepared By: [Signature]  
Clyde D. Compton, Attorney at Law  
8700 Broadway, Merrillville, IN 46410

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CR#  
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CVA