2008 018087

STATE OF INDIANA FILED FOR RECORD

2008 MAR 13 AM 10: 26

MICHAELLA BROWN

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., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against ELIZABETH WILLIAMS, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 22nd day of October, 2007, and recorded on the 15th day of November, 2007 (as instrument number 2007-090692), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of ELIZABETH WILLIAMS, in the amount of Seven Hundred Five and 00/100 (\$705.00) Dollars, is released this

Hospitals, Inc. specifically reserves all rights it may have to collect the balance due.

J54 day of FEBRUARY , 2008. In the event full payment of the hospital charges has not been received. The Methodist Yolanda Jaime STATE OF INDIANATHE 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 dath, says that the facts stated in the foregoing are true and correct. Yolanda Jaime Subscribed and sworn to before me, a Notary Public, this Notary Public A Resident of (10) County My Commission Expires: Official Seal LISA STONE Resident of Lake County, IN (SEAL My commission expires March 24, 2011 I affirm, under the penalties for perjury I have taken reasonable care to redact each social Algrammada (V) security number in this document, unless required by law This instrument Prepared By: Clyde D. Compton, Attorney at Law 8700 Broadway, Merrillville, IN 46410