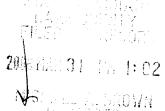
2008 022591



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 Carrol Pirtle Guarantor For PIERRE PIRTLE, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 26th day of December, 2006, and recorded on the 19th day of January, 2007 (as instrument number 2007-005460), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of PIERRE PIRTLE, in the amount of Two Thousand Seven Hundred Twenty Eight and 00/100 (\$2728.00) Dollars, is released this 18th day of _________, 2008.

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.
NOIORFACIALA
BY: de dear
This Document Yolanda Jaimeroperty of
STATE OF INDIANA he Lake County Recorder!
) 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 oath, says that the facts stated in the foregoing are true
and correct.
Thu been
Yolanda Jaime
Subscribed and sworn to before me, a Notary Public, this 18 day of Million, 2008.
Husa Stone
Notary Public
A Resident of Hall County
My Commission Expires:
Official Seal
Manch 24, d0// Resident of Lake County, IN
My commission expires March 76, 2011
- The count manufactural and a second
I affirm, under the penalties for perjury, that I have taken reasonable care to redact each social
security number in this document, upless sequired by lay.
security number in this document, upless required by lay. This instrument Prepared By:
This histi difficilit Tepared By.
Clyde D. Compton, Attorney at Law
8700 Broadway, Merrillville, IN 46410
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