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RECORDED

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 TIMOTHY P. GRANGER, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 20th day of February, 2008, and recorded on the 5th day of March, 2008 (as instrument number 2008-016228), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of TIMOTHY P. GRANGER, in the amount of Two Thousand Six Hundred Thirty Six and 00/100 (\$2636.00) Dollars, is released this 17th day of March, 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.

BY: [Signature]
Yolanda Jaime

NOT OFFICIAL!
This Document is the property of
the Lake County Recorder!

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 17th day of March, 2008.

[Signature]
Notary Public
A Resident of Laure County

My Commission Expires:

March 31, 2011

Official Seal
LISA STONE
Resident of Lake County, IN
My commission expires
March 31, 2011

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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