2008 064020

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2008 SEP 11 AM 11: 05

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., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against GARRICK D. CURRIE, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 15th day of April, 2008, and recorded on the 29th day of April, 2008 (as instrument number 2008-030846), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of GARRICK D. CURRIE, in the amount of Six Thousand Six Hundred Twenty Three (\$6623.00) Dollars, is released this day of April, 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: Yolanda Jaime

STATE OF INDIANA) 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.

Subscribed and sworn to before me, a Notary Public, this

Ydlanda Jaime

day of <u>Leptember</u> 2008.

A Resident of Auna County

(SEAL)

My Commission Expires:

March 24, 2011

March 12, 2011

taken reasonable care to redact each social

Official Seal

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 dequired by law.

This instrument Prepared By:

Clyde D. Compton, Attorney at Law 8700 Broadway, Merrillville, IN 46410

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