2008 065972

2000 SEP 19 ATTH: 08 MICHAEL A. BAOW I RECONDER

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 NIKOLE GODFREY, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 22nd day of January, 2008, and recorded on the 4th day of February, 2008 (as instrument number 2008-007884), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>NIKOLE</u> <u>GODFREY</u>, in the amount of <u>One Thousand Nine Hundred Eighty Five</u> (\$1985.00) Dollars, is released this 10th day of September, 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. Yolanda Jaime STATE OF INDIANA COUNTY OF LAKE Yolanda Jaime, being the Service Unit Manager for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her path, says that the facts stated in the foregoing are true and correct. Yolanda Jaime Subscribed and sworn to before me, a Notary Public, this 10 h day of Japhember, 2008. **Notary Public** County A Resident of Jaw Official Seal My Commission Expires: LISA STONE Mareh 24, 2011 Resident of Lake County, IN My commission expires (SEAL) taken reasonable care to redact each social that I hav I affirm, under the penalties for perjy quired lax security number in this document, <u>CK19002</u> This instrument Prepared By: le D. Compton, Attorney at Law roadway, Merrillville, IN 46410