STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2008 066507

2008 SEP 24 AM 9:\33

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 WILLIAM HUTTER, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 23rd day of April, 2008, and recorded on the 15th day of May, 2008 (as instrument number 2008-036011), in the Office of the Recorder of Lake County, Indiana, for the HUTTER, in the amount of Seven Hundred Sixteen (\$716.00) Dollars, is released this 22 day of

reasonable and necessary charges for hospital care, treatment and maintenance of WILLIAM , 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: STATE OF INDIANA 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. Subscribed and sworn to before me, a Notary Public, this Zawday of Juntemb Lin Notary Public A Resident of Kalle County My Commission Expires: Official Seal LISA STONE Resident of Lake County, IN My commission expires . 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: CUISOLI Clyde D. Compton, Attorney at Law 12 8700 Broadway, Merrillville, IN 46410 的