STATE OF HIDIAKA LAKE COUNTY FILED FOR RECORD

2008 067338

2600 SEP 26 PM 2: 37

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 JAMES KETEN, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 30th day of April, 2008, and recorded on the 29th day of May, 2008 (as instrument number 2008-039626), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of JAMES KETEN, in the amount of One Thousand Eight Hundred Sixty Two and 95/100 (\$1,862.95) Dollars, is released this 24'

day of September 1,2008. TORFICIAL 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. METHODIST HOSPITALS, INC. danda Jaime 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 fath, says that the facts stated in the foregoing are true and correct. Yolanda Jaime Subscribed and sworn to before me, a Notary Public, this all day of Kusa Stone **Notary Public** A Resident of Sale County My Commission Expires: Official Seal LISA STONE march 24, 2011 Resident of Lake County, IN My commission expires
March 16, 2011 I affirm, under the penalties for perjury I hav ken reasonable care to redact each social security number in this document, while This instrument Prepared By: Clyde D. Compton, Attorney at Law 8700 Frozdway, Merrillville, IN 46410

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