STATE OF INDIANA LARE COUNTY FILED FOR RECORD

2008 067340

2001 SEP 26 Fr 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., Southlake Campus, 600 Grant Street, Gary, Indiana 46402, against RICHIE D HODGES, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 28th day of May, 2008, and recorded on the 16th day of June, 2008 (as instrument number 2008-043513), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of RICHIE D HODGES, in the amount of Five Hundred Sixty Two (\$562.00) Dollars, is released this 24th day of Storensey, 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 Yorkida 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.

Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 24" day of 200 tember 2008

) DYWGSTONE 0 N

Notary Public

A Resident of <u>Falo</u> County

My Commission Expires:

March 24, 2011

Official Seal
LISA STONE
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 required by law.

This instrument Prepared By:

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

PB