STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2008 076732

2008 NOV 10 PH 3: 14

MICHAEL A. BROWN

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 CAROL DIANE SMITH, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 16th day of September, 2008, and recorded on the 26th day of September, 2008 (as instrument number 2008-067320), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>CAROL</u> <u>DIANE SMITH</u>, in the amount of <u>Eight Hundred Thirty Eight</u> (\$838.00) Dollars, is released this day of November 1,2008.

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. da 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 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 4th day of MIRINGER, 2008.

Luig Stone

Notary Public

A Resident of Sture County

My Commission Expires:

March 24, 2011

Resident of Lake County, IN My commission expires March 24, 2011

at I have taken reasonable care to redact each social I affirm, under the penalties for perjury security number in this document, unless required by law.

This instrument Prepared By

Official Seal

LISA STONE

D. Compton, Attorney at Law 8706 Broadway, Merrillville, IN 46410

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