STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

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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, 8701 Broadway, Merrillville, Indiana 46410, against <u>DAVID K. CRANE JR</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the <u>14th</u> day of <u>July, 2008</u>, and recorded on the <u>29th</u> day of <u>July, 2008</u> (as instrument number <u>2008-054178</u>), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>DAVID K. CRANE JR</u>, in the amount of <u>Fifty Thousand Four Hundred Four and 46/100</u> (\$50,404.46) Dollars, is released this have day of <u>November</u>, 2008.

and necessary charges for hospital care, treatment and maintenance of DAVID K. CRANE JR, in the amount of Fifty Thousand Four Hundred Four and 46/100 (\$50,404.46) Dollars, is released this 4th day of November 2,2008. The 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 oath, says that the facts stated in the foregoing are true and correct. Yolanda Jah day of / DH Subscribed and sworn to before me, a Notary Public, this **Notary Public** A Resident of Kill County My Commission Expires: LISA STONE March 24,2011 Resident of Lake County, IN My commission expires (SEAL) to Medaet each social reasonable I affirm, under the penalties for pe security number in this document, unle This instrument Prepared By: Compton, Attorney at Law Broadway, Merrillville, IN 46410