STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2008 076752

2008 NOV 10 PM 3: 16

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>JAMES A ENGLAND</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the <u>26th</u> day of <u>August</u>, <u>2008</u>, and recorded on the <u>9th</u> day of <u>September</u>, <u>2008</u> (as instrument number <u>2008-063153</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>JAMES A ENGLAND</u>, in the amount of <u>Two Thousand Five Hundred Seventy Five</u> (\$2,575.00) Dollars, is released this <u>Mayor</u> day of <u>November</u>, 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. METHODIST HOSPITALS, INC. landa 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. Subscribed and sworn to before me, a Notary Public, this $\underline{\psi}^{\uparrow \Lambda}$ day of By Wember, 2008. Notary Public Take County A Resident of My Commission Expires: Official Seal March 24, 2011 LISA STONE
Resident of Lake County, IN (SEAL My commission expires redact eacla social I affirm, under the penalties for perfury, that I have taken reasonable caresecurity number in this document, unless required by lay This instrument Prepared By: Compton, Attorney at Law 870 Broadway, Merrillville, IN 46410