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THE TEP RECERP

2009 WEV 21 For 3: 14

MIGHT AND ALBROWN

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 <u>JERON JORDAN</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the <u>2nd</u> day of <u>September, 2008</u>, and recorded on the <u>17th</u> day of <u>September, 2008</u> (as instrument number <u>2008-065260</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>JERON JORDAN</u>, in the amount of <u>Eleven Thousand Eight Hundred Three</u> (\$11,803.00) Dollars, is released this Value of Aday of 1000 and 1000 an

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 ME SHODIST HOSPITALS, INC.

BY

Yolanda 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.

Totalida Jaille

Subscribed and sworn to before me, a Notary Public, this 19 day of Novem

Notary Public A Resident of <u>Lane</u> County

My Commission Expires:

Maich 24, 2011

Official Seal
LISA STONE
Resident of Lake County, IN
My commission expires
March 24, 2011

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:

Clyde D Compton Attorney at Law 8700 Broadway, Merrillville, IN 46410

PB