STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2009 021144

2009 APR -1 PM 3: 13

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., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against STEVE BRAMBLETT, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 14th day of January, 2009, and recorded on the 28th day of January, 2009 (as instrument number 2009-004900), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of STEVE BRAMBLETT, in the amount of Two Thousand Two Hundred Forty Three (\$2,243.00) Dollars, is released this 30 day of 1000 day.

BRAMBLETT, in the amount of Two Thousand Two Hundred Forty Three (\$2,243.00) Dollars,
is released this 30° day of Mountain, 2009.
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: Volanda 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. Subscribed and sworn to before me, a Notary Public, this May of Maxie, 2009.
<u>Huig Stone</u> Notary Public
A Resident of Fillie County
My Commission Expires:
March 34, 3011 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: CK 15358
Clyde D. Compton, Attorney at Law 8700 Broadway, Merrillville, IN 46410 83