STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2009 021145

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MICHAEL A. BROWN

RECORDING: 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 MATTHEW HINTON, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was HINTON, in the amount of Five Hundred Nineteen (\$519.00) Dollars, is released this 25 day of

executed on the 19th day of January, 2009, and recorded on the 23rd day of January, 2009 (as instrument number 2009-004024), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of MATTHEW , 2009 OT OFFICI 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. ODIST HOSPITALS, INC. Xolanda 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. and correct. Subscribed and sworn to before me, a Notary Public, this 25 day of March, 2009. Notary Public A Resident of Marc My Commission Expires: Official Seal LISA STONE (SEAL) 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, which is ed b Maw.

This instrument Prepared Py:

8706 Broadway, Merrillville, IN 46410

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