2009 021163

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2009 APR - 1 PM 3: 14

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 SHERRI SHABAZ, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 9th day of February, 2009, and recorded on the 17th day of February, 2009 (as instrument number 2009-009253), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of SHERRI SHABAZ, in the amount of One Thousand Two Hundred Thirty Six and 47/100 (\$1,236.47) Dollars, is released this 35 day of March 1, 2009.

Dollars, is released this day of March , 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: Yolanda Jaime
STATE OF INDIANA) SS:
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 Jublic, this day of <u>MWCW</u> , 2009.
<u>Ling Stone</u> Notary Public
My Commission Expires: My Commission Expires: My Commission Expires: My Commission Expires: Official Seal LISA STONE Resident of Lake County, IN My commission expires I affirm, under the penalties for perjuty, that I have taken reasonable care to reduct 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
B