

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 DERICK E. BREWER, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 11th day of March, 2008, and recorded on the 24th day of March, 2008 (as instrument number 2008-020857), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>DERICK E.</u> 

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.
This Document Yolanda Jaime roberty of
STATE OF INDIANA he Lake County Recorder! ) 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 path, says that the facts stated in the foregoing are tru
and correct.  Yolanda Jaime
Subscribed and sworn to before me, a Notary Public, this $\frac{\sqrt{100}}{2000}$ day of $\frac{\sqrt{1000}}{2000}$ , 2009.
Sig Store
Notary Public  A Resident of Multiple County
My Commission Expires:
March 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: (k 15351)
Clyde D Compton, Attorney at Law 12
8700 Bradway, Merrillville, IN 46410