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STATE OF INDIANA TILED FOR RECORD 2009 MAY -6 AM 9: 29

RETURN TO: HODGES & DAVIS ACBROWN 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 CRYSTAL L JOHNSON, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 6th day of January, 2009, and recorded on the 16th day of January, 2009 (as instrument number 2009-002744), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>CRYSTAL L JOHNSON</u>, in the amount of <u>Three Thousand Five Hundred Ninty Four</u> (\$3,594.00) Dollars, is

released this 20 day of April 1, 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 HOSRITALS, INC. 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. Yolanda Jaime Subscribed and sworn to before me, a Notary Public, this 301 day of <u>(</u> Notary Public A Resident of Hall County My Commission Expires: Official Seal LISA STONE Resident of Lake County, IN Which 24 (SEAL) My commission expires March 24, 2011 that I have taken reasonable care to redact each social I affirm, under the penalties for berjur security number in this document, up requir d by law. This instrument Prepared By: Compton, Attorney at Law 870 Broadway, Merrillville, IN 46410