STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

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MICHAEL A. BROWN RETURN TO: HODGES & DANJERP.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 LIZETTE ZAMORA, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 26th day of January, 2009, and recorded on the 30th day of January, 2009 (as instrument number 2009-005503), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>LIZETTE</u> ZAMORA, in the amount of One Thousand Eight Hundred Ninty Nine (\$1,899.00) Dollars, is

released this 30° day of 140nl, 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.  This Document Yolanda Jaime
STATE OF INDIANALE Lake County Recorder!
COUNTY OF LAKE )
Yolanda Jaime, being the Service Unit Manager for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her loath, says that the facts stated in the foregoing are true and correct.  Yolanda Jaime  Subscribed and sworn to before me, a Notary Public, this 30th day of
My Commission Expires:  Nach Au 2011  Official Seal LISA STONE Resident of Lake County, IN My commission expires
I affirm, under the penalties for perjury/that I have taken reasonable ease to redact each social security number in this document/unless required by law.
This instrument Prepared By:  Clyde/D) Compton, Attorney at Law  8700 Broadway, Merrillville, IN 46410