STATE OF INDIANA
LAKE COUNTY FILED FOR RECORD

2009 031283

2869 MAY 12 AM 9: 15

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., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against JORDANA SMITH, , 2009.

represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 22nd day of January, 2008, and recorded on the 4th day of February, 2008 (as instrument number 2008-007880), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of JORDANA SMITH, in the amount of Seven Hundred Eighteen and 00/100 (\$718,00) Dollars, is released this Gray of May 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. METHODIST HO SPITALS, INC. Yolanda 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. Subscribed and sworn to before me, a Notary Public, this 6th day of May Notary Public A Resident of <u>Mulu</u> My Commission Expires: Official Seal LISA STONE manch 24, 2011 Resident of Lake County, IN My commission expires easonable care to redact each social I affirm, under the penalties for perjury security number in this document (K1544) This instrument Prepared By: ompton, Attorney at Law Broadway, Merrillville, IN 46410