STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2009 064864

2009 SEP 23 AM 10: 18

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 JENNIFER COWGER, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 5th day of August, 2009, and recorded on the 28th day of August, 2009 (as instrument number 2009-059693), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>JENNIFER</u>

COWGER, in the amount of Seven Hundred Ninty One (\$791.00) Dollars, is released this 15th
day of September 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.
NOT THE METHODIST HOSPITALS, INC.
This Document Will Woperty of the Lake County Recorder!
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.
Yolanda Jaime
Subscribed and sworn to before me, a Notary Public, this 15 day of 1000.
Rusa Stone
Notary Public
A Resident ofCounty
My Commission Expires:  My Commission Expires:  My Commission Expires:  Official Seal HISA STONE Resident of Lake County, IN My commission expires
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:  Earle F. Hites, Attorney at Law  Circles 15
8700 Broadway, Merrillville, IN 46410
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