2009 065341

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2009 SEP 25 AM 9: 27

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 JUDITH B LOWE, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 3rd day of April, 2009, and recorded on the 15th day of April, 2009 (as instrument number 2009-024118), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of JUDITH B LOWE, in the amount of Two Thousand One Hundred Sixty Seven (\$2,167.00) Dollars, is released this 23 day of Sentember 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. STATE OF INDIANA he Lake Count ) 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 oath, says that the facts stated in the foregoing are true and correct. Subscribed and sworn to before me, a Notary Public, this 23" day of Jentember, 2009 A Resident of County My Commission Expires: LISA STONE Resident of Lake County, IN 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 8700 Broadway, Merrillville, IN 46410