STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2009 069625

2009 OCT 15 PM 3: 03

MICHAEL A. BROWN

RETURN TO: HODGES & DAMIS, ROER

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 LAZARO ROUCO, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 24th day of November, 2008, and recorded on the 16th day of December, 2008 (as instrument number 2008-084822), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>LAZARO</u> ROUCO, in the amount of Eight Hundred Ninty Five (\$895.00) Dollars, is released this 9th day of Ochober _, 2009.

	e hospital charges has not been received, The Methodist ves all rights it may have to collect the balance due.
NO This Doc	THE MITHODIST NOSPITALS, INC. BY: Yolanda Jaime Yolanda Jaime
STATE OF INDIANA	ake County Recorder!
COUNTY OF LAKE) SS:	
Yolanda Jaime, being the Serve Hospitals, Inc., being duly sworr and correct.	ice Unit Manager for the Northlake Campus of The Methodist upon her oath, says that the facts stated in the foregoing are true Yokanda Jaime
Subscribed and sworn to before me, a Notary Public, this 4 day of October, 2009.	
	Notary Public A Resident of Fame County
My Commission Expires:	
march 24, 2011	Official Seal LISA STONE Resident of Lake County, IN My commission expires March 24, 2011
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.	
	Earle F. Hites, Attorney at Law 8700 Broadway, Merrillville, IN 46410

CV