2010 001299

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2010 JAN -8 PH 2: 35

CAROLYN : POLYARD ACTINETURNITOR 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 LAUREN GOMEZ, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 19th day of January, 2009, and recorded on the 23rd day of January, 2009 (as instrument number 2009-004020), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>LAUREN</u> GOMEZ, in the amount of Six Thousand Forty Five (\$6,045.00) Dollars, is released this Q day of December, 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 the Lake 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 29^{i} day of 0000Notary Public A Resident of Two County Official Seal LISA STONE Resident of Lake County In My Commission Expires: march 34, 2011 My commission expire 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