LAMADON TO ALLAND FILED FOR RECORD

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2010 JAN 12 AM 10: 23

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 SHIRLEY FORD, 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 2009-059691), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of SHIRLEY FORD, in the amount of Nine Hundred Sixty Seven and 25/100 (\$967.25) Dollars, is released this 4th day of

January, 2009: 2010. 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 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 Notary Public A Resident of My Commission Expires: Official Seal LISA STONE Resident of Lake Count 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