

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2010 001894

2010 JAN 12 AM 10:23

CARDYON L. POLLARD
ACTING 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 MICHAEL HEARN, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 23rd day of July, 2009, and recorded on the 14th day of August, 2009 (as instrument number 2009-056246), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of MICHAEL HEARN, in the amount of Six Hundred Seventy Six (\$676.00) Dollars, is released this 31st 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.

BY: Yolanda Jaime
Yolanda Jaime

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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
Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 31st day of December, 2009.

Lisa Stone
Notary Public
A Resident of Lake County

My Commission Expires:
March 24, 2011

Official Seal
LISA STONE
Resident of Lake County
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.

This instrument Prepared By: Earle F. Hites, Attorney at Law
8700 Broadway, Merrillville, IN 46410

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