STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2010 004467

2010 JAN 25 PH 2: 18



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 <u>DANIEL HENDERSON</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the <u>14th</u> day of <u>June, 2004</u>, and recorded on the <u>22nd</u> day of <u>June, 2004</u> (as instrument number <u>2004-052526</u>), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>DANIEL HENDERSON</u>, in the amount of <u>One Thousand Three Hundred Six</u> (\$1,306.00) Dollars, is released this <u>James and James and James August 1988</u>, 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.

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THE METHODIST HOSPITALS, INC.
This Document Youanda Jaime Joperty of
STATE OF INDIANA PARTY
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 22 day of 2010.
Notary Public
My Commission Expires:
Official Seat USA STONE Resident of Lake County 11
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: Forly F. Hitter Attendant Law (1/10/11)
Earle F. Hites, Attorney at Law
8700 Broadway, Merrillville, IN 46410

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