2010 JAN 27 Fin 2: 15

2010 005183

2.00

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 Andres Correa, guarantor for JOAN CORREA, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 2nd day of November, 2009, and recorded on the 23rd day of November, 2009 (as instrument number 2009-078119), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of JOAN CORREA, in the amount of Three Thousand Twenty One and 50/100 (\$3,021,50) Dollars, is released this 25° day of 1000 (\$3,021,50) Dollars, is released this 25° day of 1000 (\$3,021,50).

County, Indiana, for the reasonable and necessary charges for nospital care, treatment and
maintenance of JOAN CORREA, in the amount of Three Thousand Twenty One and 50/100
(\$3,021.50) Dollars, is released this 25 day of January, 2010.
This Document is the property of
In the event full payment of the hospital charges has not been received, The Methodist
Hospitals, Inc. specifically reserves all rights it thay have to collect the balance due.
()
THE METHODIST HOSPITALS, INC.
BY:
Yolanda Jaime
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.
Xolanda Jaime
Subscribed and sworn to before me, a Notary Public, this 257 day of 417 ((1), 2010.
Subscribed and sworn to before me, a riotally 1 abile, this 27 day or 447 free 2010.
7 in Stall
Notary Public
A Resident of <u>July</u> County
My Commission Expires:
Official Seal
MCICIO 24, 2011 Conclai Seal LISA STONE Resident of Lake Count
My CO. It Sion expire
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.
\mathcal{L}
This instrument Prepared By:

Earle F. Hites, Attorney at Law

178912

8700 Broadway, Merrillville, IN 46410

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