2010 012106

STATE OF INDIANA LAKE COUNTY OR RECORD

5 AM 9:29

RETURN TO: HODGES & DAVIS, P.C.

Attorneys at Law RECORDS 700 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 JIRI STOVICEK, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 3rd day of November, 2009, and recorded on the 18th day of November, 2009 (as instrument number 2009-076863), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>JIRI STOVICEK</u>, in the amount of <u>One Thousand One Hundred and 25/100</u> (\$1,100.25) Dollars, is released this <u>260</u> day

of February, 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. da Jaime STATE OF INDIANA 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 26 day of # Notary Public A Resident of Sune County My Commission Expires: Official Seal LISA STONE march 24, 2011 Resident of Lake County, IN 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