2010 014777

- OF INDIANA SE COUNTY

2010 MAR 17 AM 9: 15

MICHE RETURN TO PRODUCES & 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 KARA DAVIS, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 10th day of April, 2008, and recorded on the 29th day of April, 2008 (as instrument number 2008-030832), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of KARA DAVIS, in the amount of One Thousand Four Hundred Ninety Five (\$1,495.00) Dollars, is released this day of March (1,2010.) H'H

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.

EXTHODIST HOSPITALS, INC.

STATE OF INDIANA

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.

day of 1 (2010) , 2010. Subscribed and sworn to before me, a Notary Public, this

Notary Public

Official Seal

LISA STONE

My Commission Expires:

March 24, 2011

Resident of Lake County, IN My 2013 asson expires Maint 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