

2010 017628

RECORDED
2010 MAR 26 PM 3:45

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 MARIAH N SANDERS, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 26th day of January, 2010, and recorded on the 17th day of February, 2010 (as instrument number 2010-008927), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of MARIAH N SANDERS, in the amount of Seven Hundred Sixty Seven (\$767.00) Dollars, is released this 23rd day of March, 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.

THE METHODIST HOSPITALS, INC.
BY: [Signature]
Yolanda Jaime

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.

[Signature]
Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this 23rd day of March, 2010.

[Signature]
A Resident of Lake County

My Commission Expires:
March 26, 2011

Notary Public
Official Seal
LISA STONE
Resident of Lake County, IN
My Commission Expires
March 26, 2011

I affirm, under the penalties of perjury, that I have taken reasonable care to redact each social security number in this document, unless required by law.

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

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[Signature]