STATE OF MUTANA LAKE COUNTY FILED FOR RECORD

2010 077992

12010 DEC 30 PH 3: 01

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 SEAN HOGAN, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 11th day of November, 2008, and recorded on the 18th day of November, 2008 (as instrument number 2008-078746), in the Office of the Recorder of Lake County, Indiana, for

| the reasonable and necessary charges for hospital care, treatment and maintenance of <u>SEAN</u> <u>HOGAN</u> , in the amount of <u>Four Thousand One Hundred Eight</u> (\$4108.00) Dollars, is released |
|---|
| this 24 day of December, 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: Word 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. |
| Subscribed and sworn to before me, a Notary Public, this, 25 day of December, 2010. |
| Store |
| A Resident of County Notary Public |
| My Commission Expires: |
| SEAL County, IN xpires |
| 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 |
| AMOUNT \$ 12 |

NON-COM_ CLERK_