STATE OF INDIA. LAKE COUNTY FILED FOR RECORD

2014 JAN 31 PM 1: 42

RETURN TO: HODGES & AD Attorneys at Law RDER

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 SHAWNEL S SMITH, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 18th day of October, 2012, and recorded on the 7th day of November, 2012 (as instrument number 2012-078855), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of <u>SHAWNEL S SMITH</u>, in the amount of <u>Fifteen Thousand Three Mundred Thirty-Three and 25/100</u> (\$15,333.25) Dollars, is released this <u>Jorday of Lower</u>, 2014.

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.

STATE OF INDIANA SS:

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.

Yolanda Jaime

Subscribed and sworn to before me, a Notary Public, this

Notary Public

A Resident of

County

My Commission Expires:

COUNTY OF LAKE

M Jarch 34, 2019

Official Seal LISA M. STONE Resident of Lake County, IN My commission expires March 24, 2019

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

#7777-209186

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