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RETURN TO: HODGES, DAVIS, GRUENBERG, COMPTON & SAYERS
Attorneys at Law
5525 Broadway
Merrillville, Indiana 46410

RELEASE OF HOSPITAL LIEN

This is to certify that a certain hospital lien by THE METHODIST HOSPITAL OF GARY, INC., ~~Northlake Campus, 600 Grant Street, Gary, Indiana 46402, or~~ Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, (strike inappropriate address) against Carolyn Little, represented by the Sworn Statement and Notice of Intention To Hold Hospital Lien which was executed on the 9th day of December, 1985, and recorded on the 14th day of February, 1986, (as instrument number 841308), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Carolyn Little, in the amount of One Thousand Four Hundred Thirty-one and 90/100 ($ 1,431.90) Dollars, is released this 18TH day of April, 1986. Please take note that this is a release of lien and not a release of debt in the event of non or partial payment; and The Methodist Hospital of Gary, Inc. reserves all rights to collect any and all further sums due and owing on its underlying claim for services rendered to the patient.

THE METHODIST HOSPITAL OF GARY, INC.

BY: Ramona L Klaker
RAMONA KLAKER

STATE OF INDIANA)
)SS:
COUNTY OF LAKE)

Mona Klaker, being the Financial Counselor for the above named Campus of The Methodist Hospital of Gary, Inc., being duly sworn upon his/her oath, says that the facts stated in the foregoing are true and correct.

Ramona L Klaker
RAMONA KLAKER

Subscribed and sworn to before me, a Notary Public, this 18th day of April, 1986.

Deborah A. Taylor
Deborah A. Taylor, Notary Public
A Resident of Lake County

My Commission Expires:
April 20, 1987

NOTARY PUBLIC SEAL INDIANA

APR 23 11 03 AM '86
RUDOLPH CLAY
RECORDER

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

This instrument prepared by: Louis C. Zeheralis, Attorney at Law
5525 Broadway, Merrillville, IN 46410

5TD/E