RELEASE OF HOSPITAL LIEN

This is to certify that a certain Hospital Lien by THE METHODIST HOSPITALS, INC., Outpatient - Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against Steve Lawson, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 8th day of April, 1994, and recorded on the 14th day of April, 1994, (as instrument number 94027799), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Steve Pawson, in the amount of One Thousand Five Hundred Sixty-Five and 51/100 (\$1.565.51) Dollars, which is now being released this 1964 day of October, 1995.

In the event full payment of the hospital chafges has not been received. The Methodist Hospitals, Inc. specifically reserves all rights it may have to collect the balance due:

BY: REVIN O. PHILLIPS

STATE OF INDIANA

COUNTY OF LAKE

Kevin O. Phillips being an Account Representative for the Semestration and Methodist Respitals, Inc., being dely sworn upon his eath, says—that the facts stated in the foregoing are true and correct. See Semestrative for the Semestrative fo

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

day of October, 1995.

, Notary Public

A Resident of Lake County

My Commission Expires: 11-28-95

This Instrument Prepared By: Clyde D. Compton, Attorney at Law 8700 Broadway, Merrillville, IN 46410

224:2

LAKE COUNTY
LED FOR RECORD

10.50 CK# 3356