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., Outpatient - Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against Leon Harris, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 7th day of March, 1995, and recorded on the 15th day of March, 1995, (as instrument number 95013744), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Leon Harris, in the amount of Eight Hundred Ninety-Five and 00/100 (\$895.00) Dollars, is released this 344 day of May, 1996.

This Document is the property of

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:
MONITA PUCKETT

STATE OF INDIANA

SS:

COUNTY OF LAKE

Monita Puckett being an Service Activity Manager for The Methodist Hospitals, Inc., being duly sworn upon his oath, says that the facts stated in the foregoing are true and correct.

MONITA PUCKETT

Subscribed and sworn to before me, a Notary Public, this day of May, 1996.

Notary Public

A Resident of Lake County

My Commission Expires: 11-28-99

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

224:2

6031526

LAKE ODUNITY FILED FOW RECORD

1022