STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

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96 DERESURM TOLS HODGES & DAVIS, P.C. Attorneys at Law MARGARETTE CLEVELAND 8700 Broadway Merrillville, IN 46410 BECOMME.

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 <u>Oueen Joyce</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 19th day of August, 1994, and recorded on the 24th day of August, 1994 (25 instrument number 24059974), in the Office of the Recorder of Lake County, Indianal Sfor the reasonable and necessary charges for hospital care, treatment, and maintenance of Oueen Joyce, in the amount of Forty-Four Thousand Nine Hundred

Eighty-Six and /8/100 (\$44,986.78) Dollars, is released this 5th day of November 1 1996 Ocument 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. CHERRIE MITCHELL STATE OF INDIANA SS: COUNTY OF LAKE Cherrie Mitchell, being the Service Activity 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. CHERRIE MITCHELL Subscribed and sworn to before me, a Notary Public, this 5th day of Darenber, 1996. Notary Public A Resident of Lake County My Commission Expires:

8-6-99

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

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