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STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

97 FEB 28 AH 8: 45

MONING W. CAUTER REGORDER

RETURN TO:

HODGES & DAVIS, P.C. Attorneys at Law 8700 Broadway Merrillville, IN 46410

## PARTIAL 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 Linda Gill, represented by the Sworn Statement of Notice Of Intention To Hold Hospital Lien which was executed on the 27th day of September, 1994, and recorded on the 30th day of September, 1994, (as instrument number 94067794), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Linda Gill, in the amount of Three Thousand Nine Hundred Fourteen and 20/100 (\$3,914.20) Dollars, is now PARTIALLY released to the extent of One Thousand Three Hundred Twenty-Nine and 00/100 (\$1,329.00) Dollars this 2000 day of February, 1997. Please take note that this is a PARTIAL release of lien and not a release of debt; and THE METHODIST HOSPITALS, INC. reserves CONTINUING LIEN RIGHTS in the amount of Two Thousand Five Hundred Eighty-Five and 20/100 (\$2,585.20) Dollars and all rights to collect any and all further sums due and owing on its underlying claim for services rendered to the patient.

THE METHODIST HOSPITALS, INC.

RV.

MONITA PUCKETT

STATE OF INDIANA

COUNTY OF LAKE

F# 1.0

SS:

Monita Puckett being the Service Activity Manager for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her 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 25th day of February, 1997.

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

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