

97023998

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

97 APR 18 PM 9:01

MORRIS W. CARTER
RECORDER

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 - Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against Alcora Chism, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 6th day of November, 1995, and recorded on the 10th day of November, 1995, (as instrument number 95068742), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Alcora Chism, in the amount of One Thousand Six Hundred Fifty-Two and 00/100 (\$1,652.00) Dollars, is released this 15th day of April, 1997.

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 of

THE METHODIST HOSPITALS, INC.

BY: [Signature]
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.

[Signature]
MONITA PUCKETT

Subscribed and sworn to before me, a Notary Public, this 15th day of April, 1997.

[Signature], 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

10/2/97
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