

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

97067458

97OCT-7 AM 8:37

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 - Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against Jorge Santiago, Guarantor for Nancy Santiago, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 20th day of March, 1995, and recorded on the 23rd day of March, 1995, (as instrument number 95015221), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Nancy Santiago, in the amount of Five Hundred Forty-Eight and 00/100 (\$548.00) Dollars, is released this 26th day of September, 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.

THE METHODIST HOSPITALS, INC.

BY: [Signature]
YOLANDA JAIME

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Yolanda Jaime being a Service Unit 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]
YOLANDA JAIME

Subscribed and sworn to before me, a Notary Public, this 26th day of September, 1997.

[Signature]
Notary Public
A Resident of Lake County

My Commission Expires:
Jan 11, 1998

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

224:2

*W.D.
OK # 5466*