STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

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97 DEC -3 AM 9: 09

MORRIS M. CARTER

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 Charles Beal, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the <u>7th</u> day of <u>March</u>, 1994, and recorded on the <u>10th</u> day of <u>March</u>, 1994, (as instrument number <u>94018127</u>), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Charles Beal, in the amount of Two Hundred Fifty-Six and 00/100 (\$256.00) Dollars, is released this November, 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: Change Deno
	YOLANDA JAIME //
STATE OF INDIANA)	
) ss:	U
COUNTY OF LAKE)	
Yolanda Jaime being a Ser Hospitals, Inc., being duly facts stated in the foregoing	rvice Unit Manager for The Methodist sworn upon his oath, says that the are true and correct. YOLANDA JAIME
Subscribed and sworn to	before me, a Notary Public, this 🛶
day of \mathcal{I}_{00} , 1997.	
	Mary Public
	, Notary Public
	A Resident of The County
My Commission Expires:	

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

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