

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

97 DEC -3 AM 9:09

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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 Charles Beal, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 10th day of December, 1993, and recorded on the 16th day of December, 1993, (as instrument number 93084937), 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 Three Thousand One Hundred Seventy-Six and 70/100 (\$3,176.70) Dollars, is released this 24th day of 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: [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 24 day of Nov, 1997.

[Signature], Notary Public
A Resident of DeKalb County

My Commission Expires: 3-24-98

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

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