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STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

98 JUN 16 AH 9: 15 RETURN TO: MORRIS W. CARTER RECORDER

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 Linda Vaughn, Guarantor For LaTanya Henley, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 18th day of July, 1995, and recorded on the 24th day of July, 1995, (as instrument number 95041134), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of LaTanya Henley, in the amount of One Thousand Four Hundred Thirty-Two and 00/100 (\$1,432.00) Dollars, is released this 19th day of June, 1998.

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.

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STATE OF INDIANA )		U	V	
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COUNTY OF LAKE	4			
Yolanda Jaime bei				
Hospitals, Inc., bein				ys that the
facts stated in the fo	regoing are	true and c	prrect.	
	A CORDER C	Marila	auno/	
		ANDA JAIME		
Subscribed and sw	orn to before	re me, a No	tary Publ	ic, this $\underline{\mathscr{G}}$
day of,	1998 MDIAN	ma- gra	arrier	
				otary Public
	A Ro	esident of	Oche	County
My Commission Expires:				<del></del>
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This Instrument Prepared By: Clyde D. Compton, Attorney at Law 8700 Broadway, Merrillville, IN 46410 224:2

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