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STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

98 JUN 23 AN 8:19

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., Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against Leo Carter, Guarantor For Donna Carter represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 27th day of <u>March</u>, 1997, and recorded on the <u>15th</u> day of <u>April</u>, 1997, (as instrument number <u>97022795</u>), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Donna Carter, in the amount of Three Hundred Seventy-Four and 00/100 (\$374.00) Dollars, is released this //a 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.

This Document is the property of the Lake County Revorder Hospitals, INC.

YOLANDA JAIME

STATE OF INDIANA

COUNTY OF LAKE

SS:

Yolanda Jaime being a Service Unit Manager for the Southlake Campus of The Methodist Hospitals, Inc., being duly sworn upon his oath, says that the facts stated in the foregoing are true and correct.

> De Como YOLANDA JAIME

Subscribed and sworn to before me, a Notary Public, this 17 1998. day of

Notary Public A Resident of County

My Commission Expires: 3124-08

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

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