

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

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99 OCT 18 AM 9:27



MORRIS W. 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 Tommy Williams, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 13th day of September, 1999, and recorded on the 21st day of September, 1999, (as instrument number 99077546), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Tommy Williams, in the amount of One Thousand Three Hundred Ninety-Eight and 00/100 (\$1,398.00) Dollars, is released this 8th day of October, 1999.

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 8 day of Oct, 1999.

[Signature], Notary Public  
A Resident of Shelby County

My Commission Expires: 3-24-09

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

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