

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

99086848

99 OCT 21 AM 10:56

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., Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against Henrietta McCorkle represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 18th day of August, 1999 and recorded on the 9th day of September, 1999, (as instrument number 99074481), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Henrietta McCorkle, in the amount of Four Thousand Three Hundred Ninety and 37/100 (\$4,390.37) Dollars, is released this 14th 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 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.

[Signature]
YOLANDA JAIME

Subscribed and sworn to before me, a Notary Public, this 14 day of Oct, 1999.

[Signature], Notary Public
A Resident of [Signature] County

My Commission Expires:
3-24-08

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

224:2

10.00
7669