STATE OF INDIAÑA LAKE COUNTY FILED FOR ABOORD

2000 015432

2000 MAR +0 M 8 54

MORTIS VI. 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 - Southlake Campus, 8701 Broadway, Merrillville, Indiana 46410, against <u>Vern Paulus</u>. Guarantor for Samantha Paulus, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 22nd day of July, 1999, and recorded on the 3rd day of August, 1999, (as instrument number 99064270) in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Samantha Paulus, in the amount of One Thousand Six Hundred Sixty-Four and 20/100 (\$1,664.20) Dollars, is released this 24th day of February, 2000.

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 Lake County Recorder!
THE METHODIST HOSPITALS, INC. YOLANDA JAIME STATE OF INDIANA SS: COUNTY OF LAKE Yolanda Jaime being a Service Unit Manager for The Methodist Hospitals, Inc., being duly sworp upon his oath, says that the facts stated in the foregoing are true and correct. YOLANDA JAIME Subscribed and sworn to before me, a Notary Public, this 2/ day of ______, 2000. 700 Olest Notary Public A Resident of Lake County My Commission Expires: 3.24.01

This Instrument Prepared By: Clyde D. Compton, Attorney at Law 8700 Broadway, Merrillville, IN 46410 224:2

10:00 8096