STATE OF INDIANA LAKE COUNTY FILED TO TOORD

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MODER W. CARTER MITTER

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 Clara Zaideman represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 12th day of October, 1999 and recorded on the 20th day of October, 1999, (as instrument number 99086238), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Clara Zaideman, in the amount of Ten Thousand Seven Hundred Fifty-Six and 38/100 (\$10,756.38) Dollars, is released this ad the 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 bajance due.

the Lake County Recorder!
THE METHODIST HOSPITALS, INC. 10/1

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STATE OF INDIANA	YOU	ANDA JA	AIME			
COUNTY OF LAKE		9				
Yolanda Jaime being a Se	rvice /	Jnit Mar	nager fo	or the S	Southla	ke
Campus of The Methodist Hospi						
oath, says that the facts st	tatedi	n the	foregoi	ng are	true a	ind
correct.			283			
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	E	JAIME	V			
Subscribed and sworn to day of, 2000.	VQ.	WOIANA	Notary 1	Public,	this =	<u> </u>
	10	POZIKE				
	A Resi	dent of	3.1	Nota:	ry Publ County	
My Commission Expires:						

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

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