

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD



2000 057543

2000 AUG 11 AM 9:29

RETURN TO: HODGES & DAVIS, P.C.  
MORTIS W. CANNON  
RECORDER 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., Northlake Campus, 600 Grant Street, Gary, Indiana 46402, against Patricia Clemon, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 20th day of April, 2000, and recorded on the 16th day of May, 2000 (as instrument number 2000 033452), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Patricia Clemon, in the amount of Sixteen Thousand Six Hundred Seventy-Four and 87/100 (\$16,674.87) Dollars, is released this 11th day of August, 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 METHODIST HOSPITALS, INC.

BY: [Signature]  
YOLANDA JAIME

STATE OF INDIANA )  
                          ) SS:  
COUNTY OF LAKE )

Yolanda Jaime, being a Service Unit Manager for the Northlake Campus of The Methodist Hospitals, Inc., being duly sworn upon her 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 11 day of August, 2000.

[Signature]  
, Notary Public  
A Resident of Lake County

My Commission Expires:  
3-24-08

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

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