

2000 060528

STATE OF INDIANA
STATE OF INDIANA COUNTY
LAKE COUNTY RECORDER
FILED FOR RECORD

2000 AUG 22 AM 9:54
2000 AUG 22 AM 9:56

MORRIS W. CARTER
MORRIS W. CARTER
RETURN TO RECORDERS & 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 Mae Ola Logan, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 28th day of June, 2000, and recorded on the 7th day of July, 2000, (as instrument number 2000 048381), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of Mae Ola Logan, in the amount of Two Thousand Four Hundred Sixteen and 00/100 (\$2,416.00) Dollars, is released this 16th 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 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 16 day of Aug, 2000.

[Signature]
Notary Public
A Resident of Adams County

My Commission Expires:
3-24-08

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

224:2

1000
AC
8557