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NOTARY PUBLIC
RECORDER

RETURN TO: HODGES & DAVIS, P.C.
Attorneys at Law
8700 Broadway
Merrillville, IN 46410

PARTIAL 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 ALBENNIE GRIFFIN, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 29th day of April, 2002, and recorded on the 9th day of May, 2002 (as instrument number 2002-043533), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of ALBENNIE GRIFFIN, in the amount of Forty One Thousand Six Hundred Eighty Eight and 17/100 (\$41,688.17) Dollars, is PARTIALLY released to the extent of Four Thousand Six Hundred Sixty Six and 67/100 (\$4,666.67) Dollars this 8 day of November, 2002. Please take note that this is a PARTIAL release of lien and not a release of debt; and THE METHODIST HOSPITALS, INC. reserves CONTINUING LIEN RIGHTS in the amount of Thirty Seven Thousand Twenty One and 50/100 (\$37,021.50) Dollars and all rights to collect any and all further sums due and owing on its underlying claim for services rendered to the patient.

THE METHODIST HOSPITALS, INC.

BY: [Signature]
Yolanda Jaime

STATE OF INDIANA)
)
COUNTY OF PORTER)

SS:



Yolanda Jaime, being the Service Unit Manager for 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 8 day of November, 2002.

[Signature]
Notary Public
A Resident of DePue County

My Commission Expires:
3-21-08

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



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