STATE OF DOMAND LARE COUNTY FILED FOR RECORD

2003 107589

2003 OCT -7 PH 3: 05

MORRIS W. 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>DANIEL T. DYER</u>, represented by the Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was Sworn Statement Of Notice Of Intention To Hold Hospital Lien which was executed on the 12th day of February, 2003, and recorded on the 31st day of March, 2003 (as instrument number 2003-032536), in the Office of the Recorder of Lake County, Indiana, for the reasonable and necessary charges for hospital care, treatment and maintenance of DANIEL T. DYER, in the amount of One Thousand Eight Hundred Thirty Five and 00/100 (225 00) Dollars is released this 1th day of 1th 121 (227 00) Dollars is released this 1th day of 1th 121 (227 00) Dollars is released this 1th day of 1th 121 (227 00) Dollars is released this 1th day of 1th 121 (227 00) Dollars is released this 1th 121 (227 00) Dollars is releas (\$1,835.00) Dollars, is released this 6th day of Colaber 2003. 2003.

In the event full payment of the hospital charges has not been received, The Methodist Hospitals, Inc. specafically reserves all rights it may have to collect the balance due.

> HODIST HOSPITALS, INC. anda Jaime

STATE OF INDIANA

COUNTY OF LAKE

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.

Molanda Jaime

Subscribed and sworn to before me, a Notary Public, this __ day of October, 2003.

ande

Notary Public

A Resident of County

My Commission Expires:

324.08

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

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