

GROVER C. DILS MEDICAL CENTER

P.O. Box 38 Caliente, Nevada 89008 702-726-3171

August 1, 1997

Yuriko Setzer Lincoln County Recorder P. O. Box 218 Pioche, NV 89043

Dear Ms. Setzer,

Upon instruction from the Board of Trustees, Lincoln County Hospital District, I request that the lien placed on the property of Donna Rose Garrison and Ira Garrison (deceased) be extinguished.

Through financial arrangements with Ms. M. Gunn, who holds financial power of attorney for Mrs. Garrison, the Board of Trustees has voted to allow the payment arrangement to take precedent over the lien and that the lien be effectually satisfied.

I have attached a copy of the original filing which indicates that the document was registered with your office November 3, 1986 in book 72 page 546.

Should you require additional information concerning this requested action, please feel free to contact me at (702) 726-3171 extension 13.

Sincerely,

B. R. ELKINS Administrator

cc: M. Gunn

BOCK 129 Mar 440

HOSPITAL LIEN UPON REAL PROPERTY

CHAPTER 108.662 of NEVADA REVISED STATUTES

(As Amended by Chapter 545, June 7th, 1985)

NOTICE is hereby given that GROVER C. DILS MEDICAL CENTER has rendered services in hospitalization for IRA GARRISON, a person who was admitted to GROVER C. DILS MEDICAL CENTER on the 27th day of June , 1985 in the City of Caliente, County of Lincoln, State of Nevada.

THAT GROVER C. DILS MEDICAL CENTER hereby claims a lien upon real property of which the owner on record is IRA GARRISON and DONNA ROSE GARRISON, husband and wife. The description of the said real property is as follows:

> All of lots Four (4), Five (5) and Six (6) in Block Numbered Twenty (20) in the town of Pioche, as said lots and block are delineated on the official plat of said town of Pioche, now on file in the office of the County Recorder of said Lincoln County, Nevada, and to which plat and records thereof reference is hereby made for further particular description. further particular description.

THAT hospitalization was rendered between the 27th

June 1985 and the 7th day of December 19 85 for which an itemized statement is attached.

THAT GROVER C. DILS MEDICAL CENTER demands for such care or service in the sum of \$3,684.30 been paid except \$ NONE __ and that no part thereof has been been paid except \$ NONE and that there is now due and owning and remaining unpaid of such sum, after deducting all credits and offsets, the sum of \$3,684.30 _ in which amount lien upon real property is hereby claimed.

> GROVER C. DILS MEDICAL CENTER Title Administrator

STATE OF NEVADA

COUNTY OF LINCOLN

SUBSCRIBED and SWORN to before me this

28th day of October

John F. Shiffler, MOTARY PUBLICAN and for the above County and State

RETURN TO: GROVER C. DILS MEDICAL CENTER P.O. BOX 38 Caliente, Nevada 89008

Rotary Public-State of Aevasta
COUNTY OF LINCOLN
My Appointment Expires: June 10, 1990 873 - 100 - FILED AND RECORDED AT REQUEST OF

Notary Public-State of Nevada

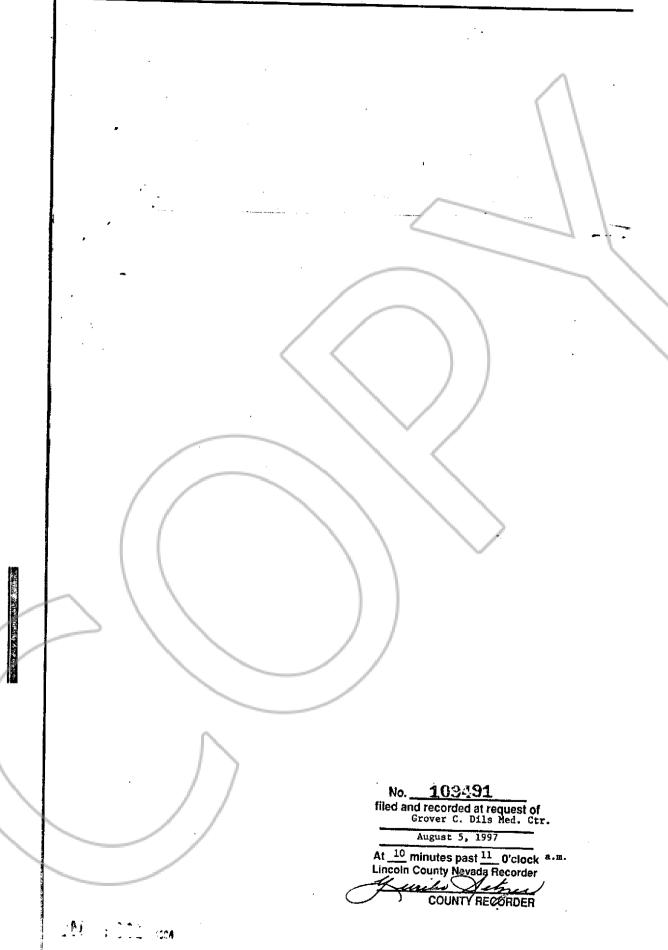
Grover C. Dils Med. Center Nov. 3. 1986

AT ___ MINUTES PAST __ O'QUOOK

UNCOLN COURTY NEVADA, RECORDER 129 TATE 441

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R. WIAM PANI) Deputy ROCKER



BOCK 129 HASE 442