675149

cc: To Patient and/or Responsible Relative

State Form 24209

STATE OF INDIANA DEPARTMENT OF MENTAL HEALTH 429 North Pennsylvania Street Indianapolis, Indiana 46204

ORIGINAL

AUTHORITY TO RECORDER TO RELEASE LIEN

To th	e Recorder of	Lake	Coı	inty, Indiana:		
	You are hereby	authorized to releas	e the following	described lier	n for Patient	's Cost
of Tr	eatment and Ma	intenance under Acts	1981, P.L. 178	3 (I.C. 1981 16	5-14-18.1-4)	for the
follo	wing described	real estate:				
	Wicker Park	Manor I 24 B1 6 - F	V #07 160 04			
	WICKEL TALK	riatio1 11. 24 B1 6 - 1	Rey #27-109-24		₩ [ii	TIE (a
					RE LELEN	F5 35
	Recorder's	s Instrument No. 63	39516		LIAM BIELSKI JR	
		in NA			ORDEC	1000 100 100 100 100 100 100 100 100 10
		on August 10, 1981			яг Ув.	:n 2
more (commonly known a	8201 Wicke	er Park Drive, H	ighland, IN		
		the improvements th	a de la companya de			
Name	of Real Estate (Owner Andrew	Scobbie and Mar	garet Scobbie	n 4,64	
		rgaret Scobble	提供 医黑色性动物 网络阿拉克斯特斯特	#5- 2007 等%的比較和性質的計畫的例		
Name	of Hospital	Logansport State	Hospital			
REMAR	KS: Balance o	f assets in guardiar	ship paid on acc	count, and acce	pted as settl	ement
	in full on o	bligation of patient	; release lien.			· · · · · · · · · · · · · · · · · · ·
SEAL			DENNIS R. JONES, Commissioner, De			
				\sim		
	July 15	, 1982 By:	Mary	Bly		
			NORENE B. BRIGGS Duly Appointed A			
1	Subscribed and	sworn to before me,	e dia kacamatan da k	7 duly appointed	d in conformi	ty with
Chapt	er 81, Acts of	1947, this CE WORD	day of	July		_, 1982.
		Ser			,	
		SPECIAL DEPUTY	JANICE W. MARKS	1. Harks		
		nd OF	Special Deputy	•		
		OF Openment of Manager	ý Tambér († 1881)			
This	Instrument was	prepared by and sig	ned on Ordon of	the DEDARMS	T OF MINTE	7779 A w e
STATE	OF INDIANA,	Dennis R. Jones,	COMMISSIONER OF	CHE DEPARTMEN F MENTAL HEAL'		HEALTH,