

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

Ray Sufana 3
2190 N. Main
Crown Point In.
46307

792887
ORIGINAL

AUTHORITY TO RECORDER TO RELEASE LIEN

To the Recorder of LAKE County, Indiana:

You are hereby authorized to release the following described lien for Patient's Cost of Treatment and Maintenance under Acts 1981, P.L. 178 (I.C. 1981 16-14-18.1-4) for the following described real estate:

Lonner's 2nd Sub. L. 15
27-18-0198-0015 775805

Filed in Open Court

FEB 19 1985

Recorder's Instrument No. 723856
Recorded in N/A
Recorded on September 2, 1983

David M. Lawrence
CLERK OF SUPERIOR COURT

more commonly known as 432 North Hobart Road, Hobart, IN

together with all of the improvements thereon.

Name of Real Estate Owner Frank C. Laurent & Reva Laurent

Name of Patient Frank C. Laurent

Name of Hospital Logansport State Hospital

REMARKS: Payment as per settlement,
therefore lien is released

STATE OF INDIANA / DEPT. OF MENTAL HEALTH
LAKE COUNTY
FILED FOR RECORD
FEB 21 3 09 PM '85
RUDDEN, CLAY
RECORDER

SEAL

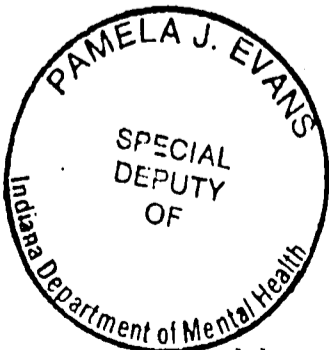
DENNIS R. JONES, M.S.W., M.B.A.,
Commissioner, Department of Mental Health

February 18, 19 85.

By:

Norene B. Briggs
NORENE B. BRIGGS, Reimbursement Director
Duly Appointed Agent of the Commissioner

Subscribed and sworn to before me, a Special Deputy duly appointed in conformity with Chapter 81, Acts of 1947, this 18th day of February, 1985.



Pamela J. Evans
PAMELA J. EVANS
Special Deputy

This Instrument was prepared by and signed on Order of the DEPARTMENT OF MENTAL HEALTH, STATE OF INDIANA, Dennis R. Jones, COMMISSIONER OF MENTAL HEALTH.

cc: To Patient and/or Responsible Relative

M/E