

899097

RELEASE OF HOSPITAL LIEN

This is to certify that a certain claim by St. Anthony Medical Center
Main at Franciscan Rd., Crown Point, IN 46307 in connection with the Notice

of Intention to Hold Hospital Lien which was recorded on the 5
day of Nov, 19⁸⁶, (as Instrument No. 884306)

in the office of the Recorder of Lake County, Indiana, and was
for the reasonable and necessary charges for hospital care, treat-
ment and maintenance of Shane Trueblood #2172331 603 W. Oakwood Lowell In 46356 in

the amount of Seven Hundred fifty two and 80/100

Dollars (\$ 752.80) has been (fully/partially) paid and the

Recorder is hereby authorized to release said lien against _____

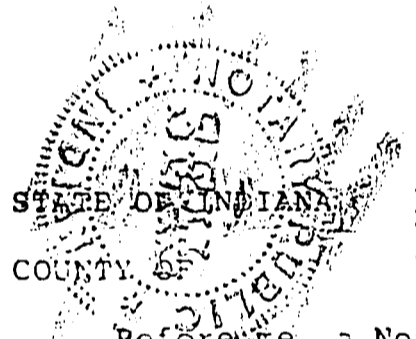
Shane Trueblood, Elizabeth Wisch, Aetna Ins.

JAN 28 11 30 AM '87
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

Date: 1-27-87

BY: Walter J. Garbarczyk
(Signature)

Walter J. Garbarczyk
(Printed)



STATE OF INDIANA)
COUNTY OF LAKE) SS:

Before me, a Notary Public in and for said County and State,
personally appeared Walter J. Garbarczyk, who acknowledged
the execution of the foregoing Release of Hospital Lien.

1987 WITNESS my hand and Notarial Seal this 27 day of Jan.

My Commission Expires:
5-28-89

Shirley A. Heurick
NOTARY PUBLIC

My County of Residence:
Lake

Shirley A. Heurick
Typed or Printed Signature

This instrument was prepared by Sharon M. McPhee
Attorney at Law.

Return to: St. Anthony Medical Center
Main at Franciscan Road
Crown Point, Indiana 46307
Attn: Bus. Dept.



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