

933971

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 23  
day of July, 1987, (as Instrument No. 929581)  
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 #128189 Christine Briggs 16651 Mount Lowell In 46356 in  
the amount of Six thousand four hundred and three and 85/100

Dollars (\$ 5000.00 ) has been (fully/partially) paid and the  
Recorder is hereby authorized to release said lien against \_\_\_\_\_  
State Farm 16 W. 84th Dr. Merrillville In 46411 Attn Rose Glinda

Date: 8-19-87

BY:

Walter J. Garbarczyk  
(Signature)

Walter J. Garbarczyk

(Printed)

AUG 20 11 09 AM '87

WILLIAM BLASTICK  
L.C. RECORDER

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.

19 87 WITNESS my hand and Notarial Seal this 19 day of Aug.

My Commission Expires:

5-28-89

Shirley A. Hedrick  
NOTARY PUBLIC

My County of Residence:

Lake

Shirley A. HEDrick

Typed or Printed Signature

This instrument was prepared by

Shirley M. McPhee  
Attorney at Law.

Return to:

St. Anthony Medical Center  
Main at Franciscan Road  
Crown Point, Indiana 46307

Attn: Law Dept

13706