



985751

# St. Anthony Medical Center, Inc.

## NOTICE TO RELEASE LIEN

You are hereby notified that ST. ANTHONY MEDICAL CENTER, Main at Franciscan, Crown Point, Indiana, 46307, intends, pursuant to I.C. 32-8-26-3, et seq., to release a Hospital Lien for all reasonable and necessary charges for hospital care, treatment, or maintenance of Shane Trueblood #120484 who resides at 603 W. Oakwood Lowell In 46356, who was admitted to the hospital on Sept 1 1986, discharged on Sept 2 1986, and whose bill for such services is in the amount of \$ 835.20, was satisfied on 5-19-88 in the amount of \$ 835.20, which was recorded on the 29 day of Sept, 19 86, (as Instrument No. 877610) in the office of the Recorder of Lake County, Indiana.

- Elizabeth Wisch 5100 W. 173rd Lowell In. 46356
- Aetna 8061 E. 82nd St. Indpls In. 46250 #227SY4301969PCA

LILLIAN A. BLASTICK  
 RECORDER, LAKE COUNTY  
 CROWN POINT, INDIANA No. 46307  
 FILED FOR RECORD

JUL 6 1 25 PM '88

ST. ANTHONY MEDICAL CENTER

By:

*Laura L. Slacian*  
 \_\_\_\_\_  
 Laura L. Slacian

STATE OF INDIANA )  
 ) SS:  
 COUNTY OF LAKE )

Laura L. Slacian, being the Collection Supervisor for the above named ST. ANTHONY MEDICAL CENTER, being duly sworn upon his/her oath, says that the facts stated in the foregoing are true.

This instrument was prepared by:

*Laura L. Slacian*  
 \_\_\_\_\_  
 Laura L. Slacian

*Laura L. Slacian*  
 \_\_\_\_\_  
 Laura L. Slacian

Subscribed and sworn to before me, a Notary Public, this 1 day of

July, 1988.

*Shirley A. Hedrick*  
 \_\_\_\_\_  
 Shirley A. Hedrick Notary Public

My Commission Expires:

5-28-89

A resident of Lake County

Revised 9-15-87

*524*