This is to certify that a certain claim by Munster Medical
Research Foundation d/b/a The Community Hospital
against Nanette Rebar
in connection with the Notice of Intention to Hold Hospital Lien
which was executed the $\frac{23\text{rd}}{}$ day of $\frac{\text{May}}{}$ , $\frac{1990}{}$ and
recorded on the 25th day of May , 1990 (as
instrument No. 102699 (in Hospital Lien Book, Page 102699)
in the office of the Recorder of Lake County, Indiana,
and was for the reasonable and necessary charges for hospital care,
treatment and maintenance of Nanette Rebar
acct. 5587860 in the amount of Four Thousand Four Hundred Ninety and 70/10
Dollars (\$ 4,490.70 ) has been fully paid and satisfied and the
Recorder is hereby authorized utilities said lien solely as to
the above-described profith First CIAIday of July , 1990.
This Document is the property of the Lake County Recorder!  (Signature)  ROBERT STATE OF THOMASSING (Printed)  (Printed)  (Printed)
STATE OF INDIANA ) SS:
COUNTY OF LAKE
Before me, a Notary Public in and for said County and State,
personally appeared Deborah J Chiaro , who acknowledged
the execution of the foregoing Release of Hospital Lien.
Witness my hand and Notarial Seal this 16th day of Alley 1990
My Commission Expires:  (Signature)
10/22/93 Sandra Crytzer
Residing in Lake County, Indiana. (Printed)  Notary Public
This instrument was prepared by Deborah J Chiaro , Patient
Representative, The Community Hospital.