

141007



# 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 James Zeck Acct # 151355 who resides at 11671 W. 1100 N. Demotte IN. 46310, who was admitted to the hospital on 1-23-90, discharged on 1-30-90, and whose bill for such services is in the amount of \$ 10076.00, was satisfied on 10-30-90 in the amount of \$ 10076.00, which was recorded on the 8 day of Mar., 19 90, (as Instrument No. 088154) in the office of the Recorder of Lake County, Indiana.

- Chad Edmonds 15903 Whiteoak Lowell In. 46356 (Driver)
- Jerry Edmonds 15903 Whiteoak Lowell In. 46356 (INSured)
- Moore Group PO Box 416 Crown Point In. 46307 Policy # 5281669C0414C

**Document is NOT OFFICIAL**  
 This Document is the property of the Lake County Recorder!

**STOP**

ST. ANTHONY MEDICAL CENTER  
 By: Laura L. Slacian  
 Laura L. Slacian

DEC 29 11 22 AM '90

STATE OF INDIANA/S.S. NO. 1271000000000

STATE OF INDIANA  
 COUNTY OF LAKE

SS:



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  
 Subscribed and sworn to before me, a Notary Public, this 27 day of December, 19 90.

Shirley A. Hedrick  
 Shirley A. Hedrick Notary Public

My Commission Expires:  
9-12-93

A resident of Lake County

5200