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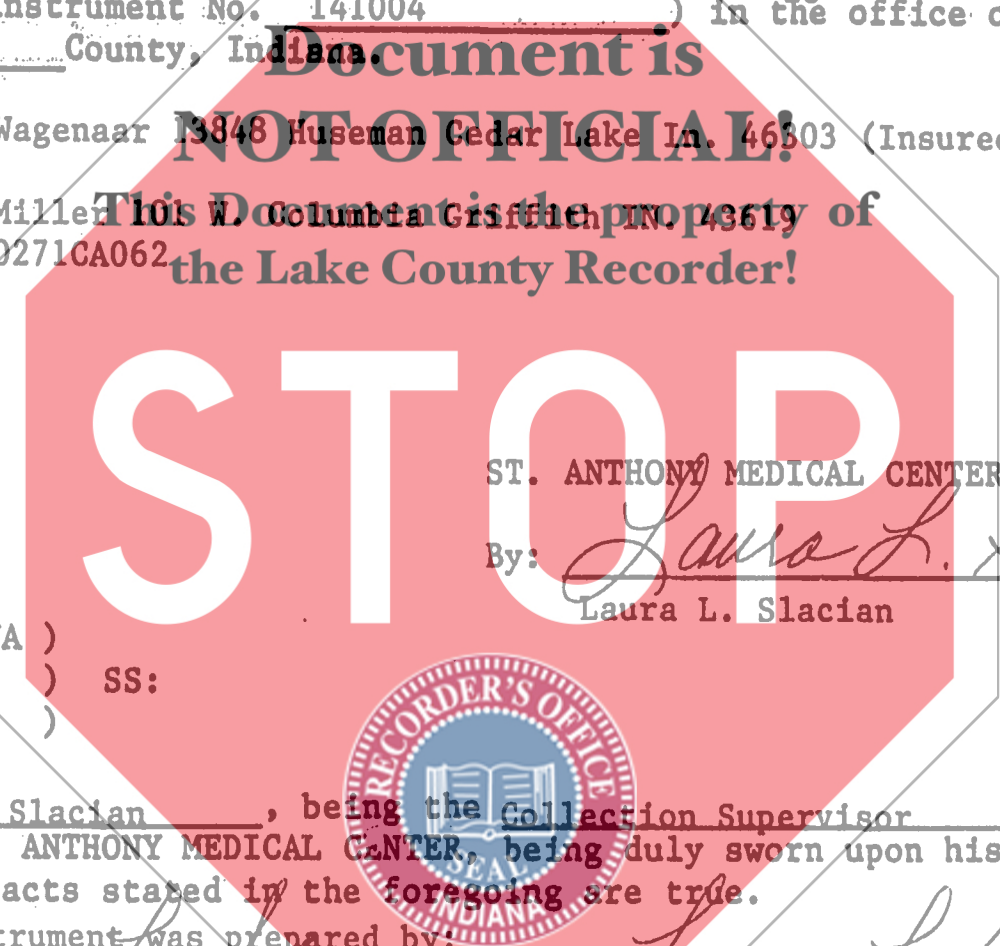
St. Anthony Medical Center, Inc.

Partial 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 Charles Wagenaar Acct # 157454 who resides at 13848 Huseman Cedar Lake In. 46303, who was admitted to the hospital on 8-28-90, discharged on 9-12-90, and whose bill for such services is in the amount of \$ 36404.95, was satisfied on 12-5-90 in the amount of \$ 35147.95 Partial release which was recorded on the 20 day of Dec., 19 90 (as Instrument No. 141004) in the office of the Recorder of Lake County, Indiana.

Richard Wagenaar 13848 Huseman Cedar Lake In. 46303 (Insured)

Spitz & Miller 1015 W. Columbia Griffith IN. 46619 of Claim # 0271CA062 the Lake County Recorder!



STATE OF INDIANA/S.S. NO.
LAKE COUNTY
FILED FOR RECORD
FEB 22 10 33 AM '91
ROBERT J. ...
RECORDED ...

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

Subscribed and sworn to before me, a Notary Public, this 19 day of Feb., 19 91.

Shirley A. Hedrick
Shirley A. Hedrick Notary Public

My Commission Expires:
6-13-93

A resident of Lake County

5.00