This is to certify that a certain claim by M	Munster Medical
Research Foundation d/b/a The Community	' Hospital
against Miguel Herrera 3120 53rd Place, Chicago,	Illinois 606032
in connection with the Notice of Intention t	o Hold Hospital Lien
which was executed the 24th day of Januar	y , 19 91 and
recorded on the 6th day of February	19 <u>91</u> (as
instrument No. 91005890 (in Hospital Li	en Book, Page 910058 <b>9</b> 0
in the office of the Recorder of Lake	County, Indiana,
and was for the reasonable and necessary cha	rges for hospital care,
treatment and maintenance of Miguel Herrera	<u> </u>
6069314in the amount ofOne Tho	usand One Hundred Forty Eight and
Dollars (\$_1,148.25 ) has been fully paid	25/00
Recorder is hereby authorized to release sa	id lien solely as to
the above-described party this is the property	day of June , 1991
the Lake County Recorder!	
	Det Stafe Collection Click
	(Signature)
Jud ERSON	ith Wolfe, Collection Clerk (Printed)
STATE OF INDIANA	N 18
COUNTY OF LAKE	INDIA KE CO S. FOR RECO RECO
Before me, a Notary Public in and for said C	ounty and State,
personally appearedJudith Wolfe	e e e e e e e e e e e e e e e e e e e
the execution of the foregoing Release of Ho	
Witness my hand and Notarial Seal this $/44$	day of 1/1/19
My Commission Expires: $\int \int \int O(1) \left( \frac{1}{2} - \frac{1}{2} \right) dt$	Annin Activities (Signature)
Mesiding in Lake County, Indiana.	Innon C Schnide
	Notary Public
This instrument was prepared by	, Patient
Representative, The Community Hospital.	