## RELEASE OF HOSPITAL LIEN

This is to certify that a certain claim by Munster Medical
Research Foundation d/b/a The Community Hospital
against Belinda Hamby
in connection with the Notice of Intention to Hold Hospital Lien
which was executed the 5th day of April , 19 89 and
recorded on the 6th day of April , 19 89 (as
instrument No. 030811 (in Hospital Lien Book, Page 030811)
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 Belinda Hamby
4793519 in the amount of One Thousand Eight Sixty Five and 60/100
Dollars (\$ 1,865.60   Das been fully baid and satisfied and the
Recorder is hereby authorized to release said lien solely as to
the above-describer backurnant is 27 the property of May , 19 92 .
Judith Wolfe, Collection Clerk  (Signature)  STATE OF INDIANA  SS:  COUNTY OF LAKE
Before me, a Notary Public in and for said County and State,
personally appearedJudith Wolfe, who acknowledged;
the execution of the foregoing Release of Hospital Lien.
Witness my hand and Notarial Seal this 27th day of May 19-92
My Commission Expires:
11-8-95 (Signature)
kesiding in Lake County, Indiana.  Shannon E. Schmal (Printed)  Notary Public
This instrument was prepared by Judith Wolfe, Patient
Representative, The Community Hospital.
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