This is to certify that a certain claim by Munster Medical
Research Foundation d/b/a The Community Hospital
againstJerry_Tessarolo, 18310 Oakley, Lansing, 1L 60438
in connection with the Notice of Intention to Hold Hospital Lien
which was executed the 30th day of October, 19 93 and
recorded on the10th day of November , 19 93 (as
instrument No. 92071067 (in Hospital Lien Book, Page92071067)
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
Dollars (\$ 3.303.00 Does been fully paid and satisfied and the
Recorder is hereby authorized to release said lien solely as to the above-described party entis the property of or March , 19 93
STATE OF INDIANA COUNTY OF LAKE Before me, a Notary Public in and for said County and State, personally appeared
the execution of the foregoing Release of Hospital Lien;
Witness my hand and Notarial Seal this 26th day of March, 1993 My Commission Expires: (Signature)
11-8-95 Shannon E. Schmal
Residing in Lake County, Indiana. (Printed) Notary Public
his instrument was prepared by Dawn Wesolowski, Patient
Representative, The Community Hospital. 7 901 Mac Arthur Blud.

TUD