RELEASE OF HOSPITAL LIEN

The Community Itospital

901 Mac Arthur Blod.

Munster Dr.

46321.

This is to certify that a certain claim by Munster Medical Research Foundation d/b/s
The Community Hospital against:

| Joseph Miller 8035 Herrison, | Munster.IN 46321 | | |
|---|-------------------------------|--|--|
| in connection with the Notice of Intention | | was executed the | |
| 18ebday of August 19 05 and re | | | |
| (as instrument No. 95050662) (in | | | |
| in the office of the Recorder of Lake | | | |
| and necessary charges for hospital care, to | | | |
| b the second | | l., 11 | |
| Lygia Miller | <u>8788952</u> | in the amount of | |
| One Thousadn Two Hundred Fifty T | wo and 00/100 | Dollars | and the second of the second o |
| (\$ 1,252.00) has been fully pale | nd antiefled and the Recorder | is hereby authorized to | |
| release said lien solely as to Melatove te | scribed party this IsA daylo | Saptember 19 05 | 9505 |
| STATE OF INDIANA) SS: COUNTY OF LAKE Before me, a Notary Public in and for sa LeAnn Echterling of the forgoing Release of Hospital Lien. | Who acknowledged the | Ivappeared PECOPDER | 6281 |
| Of the foligoning recense of Freshman Pierr | | A CONTRACTOR OF THE CONTRACTOR | |
| Witness my hand and Notarial Seal this | 15th day of September | 1985) | 1.0 |
| My Commission Expires: | Canno C (Signal | (Clima) | |
| 11-8-95 Residing in Lake County, Indiana. | Shannon E. Schm | nal (S) | |
| | (Printed) No | otary Public | |
| . | | | Kan . |

This instrument was prepared by <u>LeAnn Echterling</u>, Patient Representative The Community Hospital.

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