

RELEASE OF HOSPITAL LIEN

This is to certify that a certain claim by Munster Medical Research Foundation d/b/a

The Community Hospital against:

Bryce Grove 315 Melburn Ct Mishawaka, IN 46544

in connection with the Notice of Intention to Hold Hospital Lien which was executed the

21st day of July, 19 95 and recorded on the 25th day of July, 19 95

(as Instrument No. 95041546) (in Hospital Lien Book, Page 95041546)

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

Bryce Grove, 8756231 in the amount of

One Thousand Four Hundred Twenty One and 50/100 Dollars

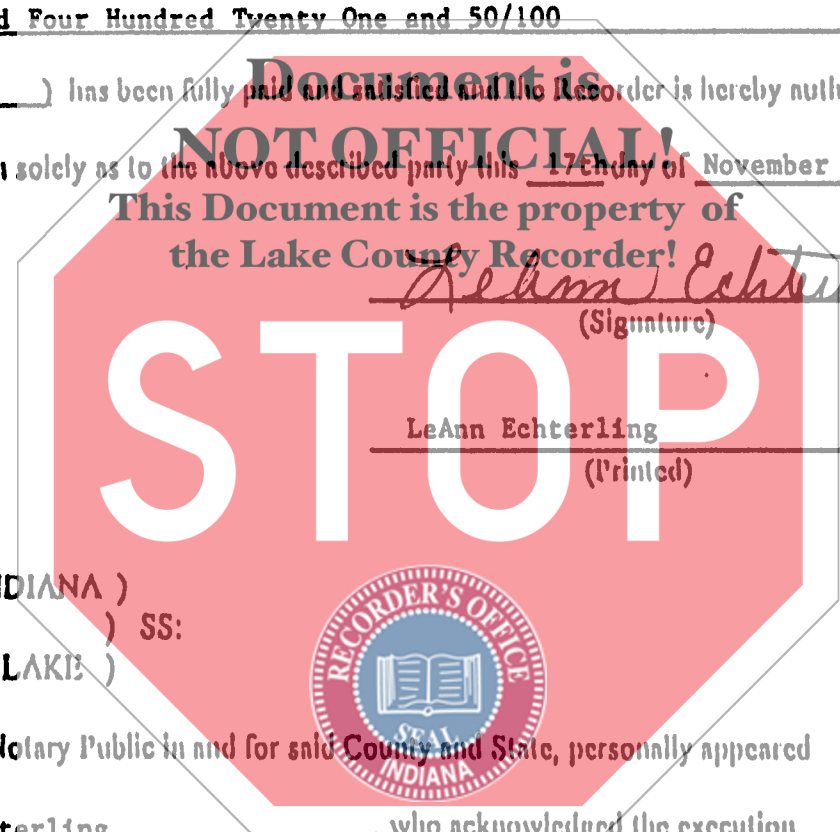
(\$ 1,421.50) has been fully paid and satisfied and the Recorder is hereby authorized to

release said lien solely as to the above described party this 17th day of November, 19 95.

Document is NOT OFFICIAL!
This Document is the property of the Lake County Recorder!

LeAnn Echterling
(Signature)

LeAnn Echterling
(Printed)



STATE OF INDIANA)
) SS:
COUNTY OF LAKE)



Before me, a Notary Public in and for said County and State, personally appeared

LeAnn Echterling, who acknowledged the execution

of the forgoing Release of Hospital Lien.

Witness my hand and Notarial Seal this 17th day of November, 19 95.

My Commission Expires:

Shannon E. Schmal
(Signature)

11-8-99
Residing in Lake County, Indiana.

Shannon E. Schmal
(Printed) Notary Public

This instrument was prepared by LeAnn Echterling, Patient Representative
The Community Hospital.

LIENREL

95071563

95 NOV 27 AM 8:43

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

MARGARET O'BRIEN
RECORDER

10.00
5/2