RELEASE OF HOSPITAL LIEN

This is to certify that a certain claim by Muns	ter Medical Research Foundation d/Wa	
The Community Hospital against:		
Robert Leath 500 9th St Southwest	t Demotte, IN 46310	
In connection with the Notice of Intention to	Hold Hospital Lien which was executed the	
22 day of December 19 95 and record	ded on the 29 day of December, 19 95	
(as instrument No. 95080109) (in Ho.	spital Lien Book, Page 95080109	
	_ County, Indiana, and was for the reasonable	
and necessary charges for hospital care, treat	ment and maintenance of	
Virgina Leath	9141748 in the amount o	r
	Six and 50/100 Dulla	18
(\$ 1,336.50) has been fully paid and a	satisfied and the Recorder is hereby authorized	l to
relense said lien solely as to the above descri	bed party this 9 day of February, 19	O
	Louise Celitaling (Signature)	. 52 6
	\cdot 0	
	LeAnn Echterling (l'rinted)	
	(Crimed)	Ange - Comme
STATE OF INDIANA)		PLET MARC
COUNTY OF LAKE)		D 27
Before me, a Notary Public in and for said C	County and State, personally appeared	27 MID:
LeAnn Echterling	who acknowledged the execution	HID: 38
of the forgoing Release of Hospital Lien.		
Witness my hand and Notarial Scal this 9	dny pf February 19 96	ρ^{2}
My Commission Expires:	Grannon E Sclima	
11-8-99	(Signature)	
Residing in Lake County, Indiana.	Shannon E. Schmal (Printed) Notary Public	
	(
This instrument was prepared by LeAnn E	Schterling Patient Representative	
The Community Hospital.		

LIENIUEL

10.00 # 275762