

RELEASE OF HOSPITAL LIEN

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

The Community Hospital against:

Shayne Pennycuff 1162 Sibley St Hammond, IN 46320

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

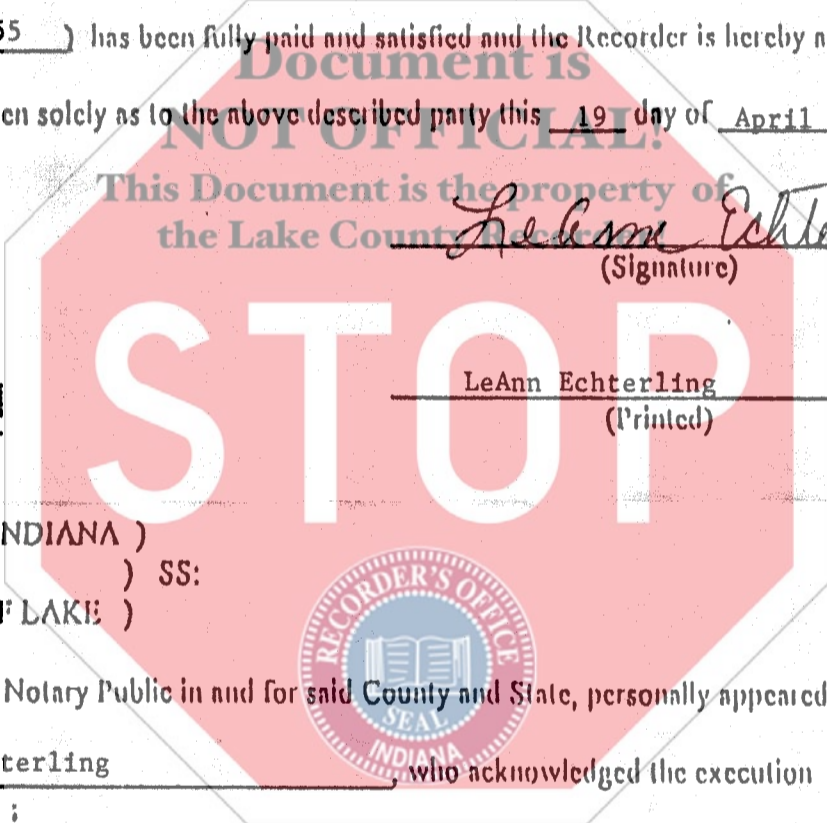
23 day of February, 19 96 and recorded on the 27 day of February, 19 96  
(as instrument No. 96012525) (in Hospital Lien Book, Page 96012525)

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

Shayne Pennycuff, 9278219 in the amount of  
Eighteen Thousand One Hundred Forty One and 55/100 Dollars

(\$ 18,141.55) has been fully paid and satisfied and the Recorder is hereby authorized to  
release said lien solely as to the above described party this 19 day of April, 19 96.

96026501



LeAnn Echterling  
(Signature)

LeAnn Echterling  
(Printed)

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
96 APR 23 AM 11:29  
MARGARETTE CLEVELAND  
RECORDER

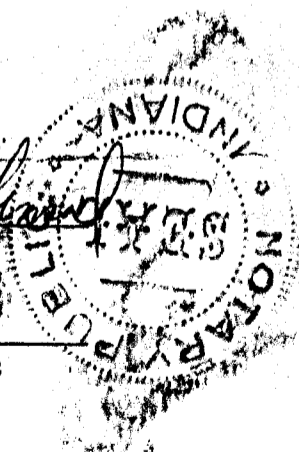
STATE OF INDIANA )  
                          ) SS:  
COUNTY OF LAKE )

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 19 day of April, 19 96.

My Commission Expires:  
11-8-99  
Residing in Lake County, Indiana.

Shannon E. Schmal  
(Signature)  
Shannon E. Schmal  
(Printed) Notary Public



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

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