

98046329

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

98 JUN 22 AM 8:51

MORRIS W. CARTER
RECORDER

The Community Hospital
901 MacArthur Blvd.
Munster, Indiana 46321

RELEASE OF HOSPITAL LIEN

This is to certify that a certain claim by *MUNSTER MEDICAL RESEARCH FOUNDATION*

d/b/a *THE COMMUNITY HOSPITAL* against ANTHONY TROJNAR, 2301 HAMPTON DR APT 9, HIGHLAND IN46322

in connection with the Notice of Intention to Hold Hospital Lien which was executed the 31ST day of

JANUARY, 19 97 and recorded on the 13TH day of FEBRUARY, 19 97 (as

instrument No. 97008995) (in Hospital Lien Book, Page 97008995) 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 LAURA TROJNAR.

Patient Account Number 4276108 in the amount of FOURTEEN THOUSAND ONE HUNDRED FORTY NINE AND 30/100

Dollars (\$ 14,149.30) has been fully paid and satisfied and the Recorder is hereby authorized to

release said lien solely as to the above described party this 5TH day of JUNE, 19 98.

Melanie Baran
MELANIE BARAN



(STATE OF INDIANA)
() SS:
(COUNTY OF LAKE)

Before me, a Notary Public in and for said County and State, personally appeared MELANIE BARAN who acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal this 5TH day of JUNE, 19 98.

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

Shannon E. Schmal
SHANNON E. SCHMAL

This instrument was prepared by MELANIE BARAN, Patient Representative, The Community Hospital.

10.00
CM
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