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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

98 JUN 25 AM 8:53

MORRIS W. CARRER
RECORDER

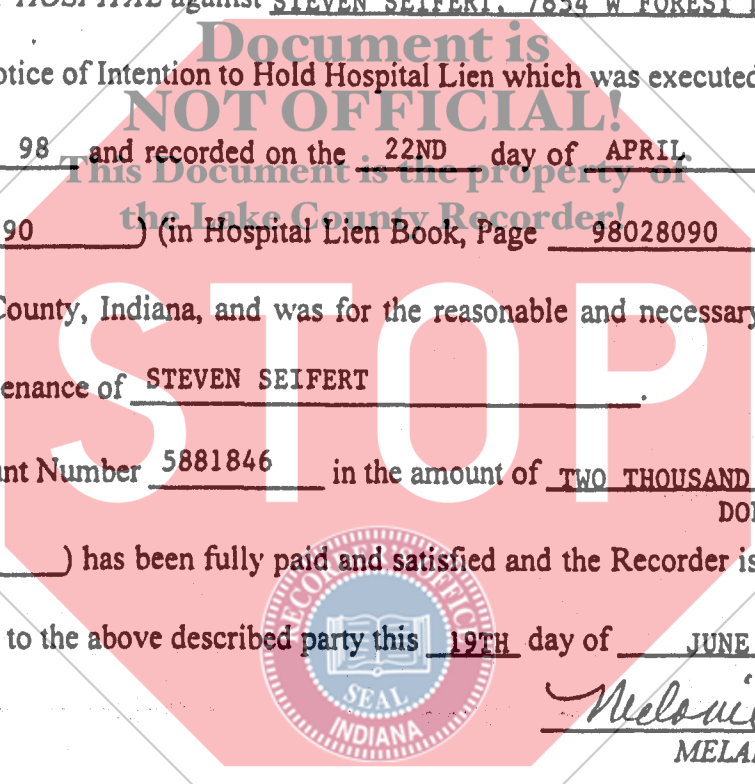
The Community Hospital
901 MacArthur Blvd.
Munster, Indiana 46321

RELEASE OF HOSPITAL LIEN



This is to certify that a certain claim by *MUNSTER MEDICAL RESEARCH FOUNDATION*
d/b/a THE COMMUNITY HOSPITAL against STEVEN SEIFERT, 7854 W FOREST LAWN RD, THREE OAKS, MI 49128
in connection with the Notice of Intention to Hold Hospital Lien which was executed the 3RD day of
APRIL, 19 98 and recorded on the 22ND day of APRIL, 19 98 (as
instrument No. 98028090) (in Hospital Lien Book, Page 98028090) 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 STEVEN SEIFERT

Patient Account Number 5881846 in the amount of TWO THOUSAND FOUR HUNDRED FORTY NINE
DOLLARS AND 30/100
Dollars (\$ 2,449.30) has been fully paid and satisfied and the Recorder is hereby authorized to
release said lien solely as to the above described party this 19TH 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
19TH day of JUNE, 19 98.

My Commission Expires: 05/14/08
Residing in Lake County, Indiana

Kathleen E. Kozanda
KATHLEEN E. KOZANDA

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

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