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STATE OF INDIAGA LAKE COUNTY FILED FOR RIECGES

99 AUG 18 AM 8: 54

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 STERK'S SUPER FOODS 5217 HOHMAN AVE	
FIFTH FLOOR HAMMOND IN 46320 OFFICIAL! in connection with the Notice of	
Intention to Hold Hospital Lien which was executed they R12TH day of APRIL 19 99	
and recorded on the	19TH day of APRIL 19 99 (as instrument No.
99032805	) (in Hospital Lien Book, Page 99032805 ) in the office of the
Recorder of LAKE County, Indiana, and was for the reasonable and necessary charges for hospital care,	
treatment and mainten	ance of HAZEL CONOVER .
Patient Account Number 7242077 in the amount of TWELVE	
THOUSAND NINE HUNDRED TWENTY-FOUR 89/100 Dollars (\$ 12,924.89 ) has been	
fully paid and satisfied and the Recorder is hereby authorized to release said lien solely as to the above	
described party this 13TH day of AUGUST , 19 99	
	SHAWN WILLIAMS-COLLECTION CLERK
(STATE OF INDIANA) ( ) SS: (COUNTY OF LAKE )	
Before me, a Notary Public in and for said County and State, personally appeared SHAWN WILLIAMS, who acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal this 13TH day of AUGUST, 19 99  My Commission Expires: 5-14-08  Residing in Lake County, Indiana  KATHLEEN KOZANDA	

This instrument was prepared by SHAWN WILLIAMS Patient Representative, The Community Hospital.

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