

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

99084231

99 OCT 13 AM 8:52

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 *GALLAGHER BASSETT 13801 RIVERPORT*

DRIVE SUITE 501 MARYLAND HEIGHTS MO 96043 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 8TH day of JANUARY 19 99

and recorded on the 25TH day of JANUARY 19 99 (as instrument No.

99006186) (in Hospital Lien Book, Page 99006186) 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 MARGARET HUCKO

Patient Account Number 6851290 in the amount of SIXTEEN

THOUSAND NINE HUNDRED TWENTY FOUR 20/100 Dollars (\$ 16,924.20) has ^{not} been

fully paid and satisfied and the Recorder is hereby authorized to release said lien solely as to the above

described party this 7TH day of OCTOBER, 19 99

Shawn Williams
SHAWN WILLIAMS

(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 7TH day of OCTOBER, 19 99
My Commission Expires: 5/14/08
Residing in Lake County, Indiana

Kathleen Kozanda
KATHLEEN KOZANDA

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

10/10
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