STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2000 002140

2000 JAN 11 AM 10: 07

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 FIREMANS FUND INSURANCE
233 S WACKER DRIVE SUITE 2000 CHICAGO IL 60606 F in connection with the Notice of
Intention to Hold Hospital Lien which was executed the 7TH day of OCTOBER 19 99 the Lake County Recorder!
and recorded on the 13TH day of OCTOBER 19 99 (as instrument No.
99084240) (in Hospital Lien Book, Page 99084240) 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 VIOLET STIMAC .
Patient Account Number 7884974 in the amount of NINE
THOUSAND SIX HUNDRED SIXTY-NINE & 50/100 Dollars (\$ 9669.50) has been
fully paid and satisfied and the Recorder is hereby authorized to release said lien solely as to the above
described party this 17TH day of DECEMBER, 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 <u>SHAWN WILLIAMS</u> , who acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal this 17TH day of <u>DECEMBER</u> , 19 99 My Commission Expires: 5-14-08 Residing in Lake County, Indiana **Residing in Lake County** Indiana**
This instrument was prepared by SHAWN WILLIAMS Patient Representative. The Community Hospital.

10 Jul 346901.

25×**│**□