

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2000 050948

2000 JUL 19 AM 11:50

**CERTIFICATE OF RELEASE**

MORRIS W. CARTER  
RECORDER

PATIENT NAME: CHESTER CZAZASTY

DATE OF ADMISSION: 05/07/98

DATE OF DISCHARGE: 06/04/98

AMOUNT OF CLAIM: \$224.00

HOSPITAL LIEN DOCKET NO: 98048837

Notice is hereby given that the Lien of St. Mary Medical Center pertaining to the above-named Patient has been discharged.

Authority is hereby given to the Recorder of Deeds to release the above referenced Hospital Lien, in accordance with the provisions of Indiana Code 32-8-26-7.

St. Mary Medical Center, Inc.

By:   
Robert M. Mirkov, Attorney  
St. Mary Medical Center, Inc.

cc: Indiana Department Of Insurance  
311 West Washington Street, Suite 300  
Indianapolis, Indiana 46204-2787

This Instrument Prepared By:  
The Law Offices Of James E. Dougherty  
8550 Broadway  
Merrillville, Indiana 46410  
(219) 769-5500

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