

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2000 050949

2000 JUL 19 AM 11:50

**CERTIFICATE OF RELEASE** CARTER  
RECORDER

PATIENT NAME: CHESTER CZAZASTY

DATE OF ADMISSION: 04/08/98

DATE OF DISCHARGE: 05/05/98

AMOUNT OF CLAIM: \$1,166.00

HOSPITAL LIEN DOCKET NO: 98048838

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. Daugherty  
8550 Broadway  
Merrillville, Indiana 46410  
(219) 769-5500

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