

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2000 050951

2000 JUL 19 AM 11:50

CERTIFICATE OF RELEASE

MONTHS W. CANCELED
RECORDER

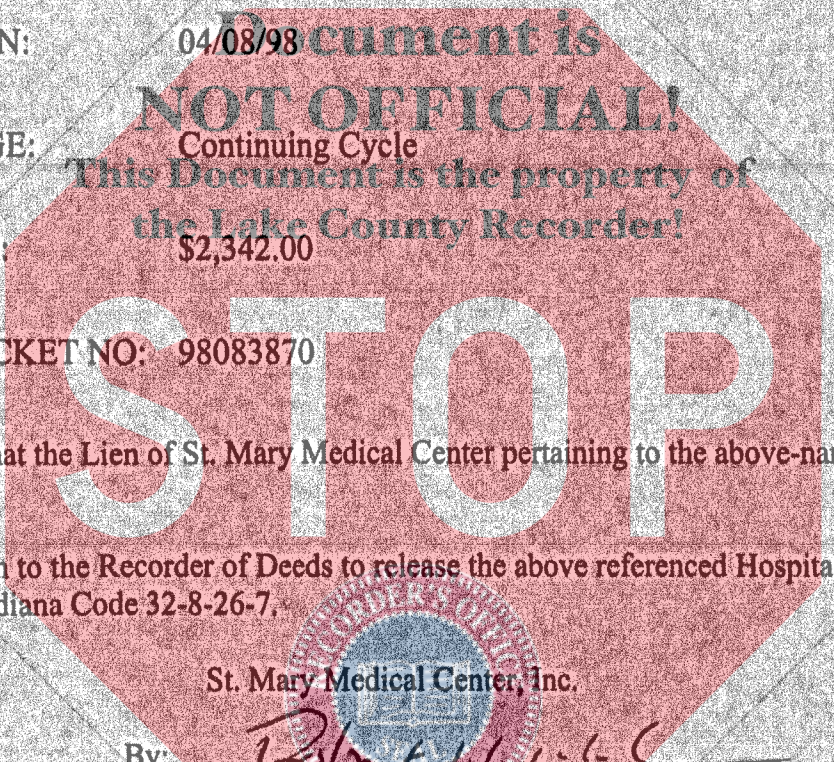
PATIENT NAME: CHESTER CZAZASTY

DATE OF ADMISSION: 04/08/98

DATE OF DISCHARGE: Continuing Cycle

AMOUNT OF CLAIM: \$2,342.00

HOSPITAL LIEN DOCKET NO: 98083870



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
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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