

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2000 050959

2000 JUL 19 AM 11:53

CERTIFICATE OF RELEASE W. CARTER
RECORDER

PATIENT NAME: MARY ANN TIMMONS

DATE OF ADMISSION: 03/17/00

DATE OF DISCHARGE: 03/21/00

AMOUNT OF CLAIM: \$4,863.35

HOSPITAL LIEN DOCKET NO: 2000 031840

Notice is hereby given that the Lien of St. Catherine Hospital 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. Catherine Hospital, Inc.

By:

Robert M. Mirkov
Robert M. Mirkov, Attorney
St. Catherine Hospital, 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

10495
10.00
AM