

FILED

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2000 SEP 15 AM 9:23

CERTIFICATE OF RELEASE

RECORDER

PATIENT NAME: RICHARD LEAVER, II

DATE OF ADMISSION: 05/06/00

DATE OF DISCHARGE: 05/06/00

AMOUNT OF CLAIM: \$3,263.65

HOSPITAL LIEN DOCKET NO: 2000 043795

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.

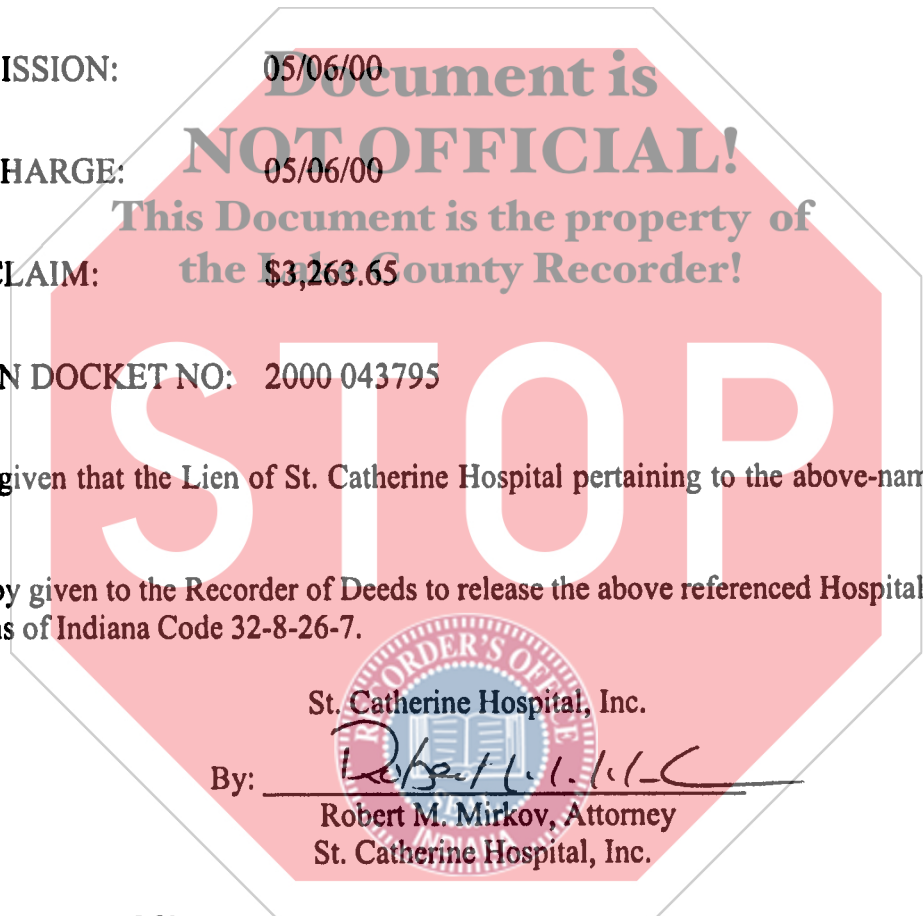
St. Catherine Hospital, Inc.

By: 
Robert M. Mirkov, Attorney
St. Catherine Hospital, Inc.

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

This Instrument Prepared By:

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The Law Offices Of James E. Daugherty
8550 Broadway
Merrillville, Indiana 46410
(219) 769-5500



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10/6/14