

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2000 077067

2000 OCT 23 PM 3:32

MORRIS W. CARTER  
RECORDER

The Community Hospital  
901 MacArthur Blvd.  
Munster, Indiana 46321

**RELEASE OF HOSPITAL LIEN**

*This is to certify that a certain claim by MUNSTER MEDICAL RESEARCH FOUNDATION*

d/b/a THE COMMUNITY HOSPITAL against STATE FARM INSURANCE 905 W GLEN PARK  
AVE GRIFFITH IN 46319 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 20<sup>TH</sup> day of JANUARY 20 00

and recorded on the 9<sup>TH</sup> day of FEBRUARY 20 00 (as instrument No.  
2000 009258 ) (in Hospital Lien Book, Page 2000 009258 ) in the office of the

Recorder of LAKE County, Indiana, and was for the reasonable and necessary charges for hospital care,  
treatment and maintenance of JASON CROZIER

Regarding Patient Account Number 3907678 in the amount of FIFTY-FOUR

THOUSAND FOUR HUNDRED EIGHTY-ONE AND 79/100 Dollars (\$ 54,481.79 )

the Recorder is hereby authorized to release said lien solely as to the above described party this

25<sup>TH</sup> day of SEPTEMBER 20 00

*Shawn Williams*  
SHAWN WILLIAMS-COLLECTION CLERK

(STATE OF INDIANA)  
( ) SS:  
(COUNTY OF LAKE )

Before me, a Notary Public in and for said County and State, personally appeared SHAWN WILLIAMS, who  
acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal  
this 25<sup>TH</sup> day of SEPT 20 00  
My Commission Expires: 5-14-08  
Residing in Lake County, Indiana

*Kathleen E O'Neill*  
KATHLEEN O'NEILL

This instrument was prepared by SHAWN WILLIAMS Patient Representative, The Community Hospital.

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E.P.  
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