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2002 FEB 21 AM 9:05

MERRILLVILLE
LAKE COUNTY
FILED
MERRIS A. 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* STATE FARM INSURANCE 16 W 84TH DRIVE
against

MERRILLVILLE, IN 46411 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 21ST day of JANUARY 20 00

and recorded on the 9TH day of FEBRUARY 20 00 (as instrument No.

8475350) (in Hospital Lien Book, Page 2000009263) 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 ANGELA RUIZ

Regarding Patient Account Number 8475350 in the amount of THREE

THOUSAND TWO HUNDRED FIFTY AND 80/100 Dollars (\$ 3,250.80)

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

8TH day of FEBRUARY 20 02

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



Judith A. Kloha
JUDITH A. KLOHA-COLLECTION CLERK

Before me, a Notary Public in and for said County and State, personally appeared JUDITH A. KLOHA, who
acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal
this 8TH day of FEBRUARY 20 02

My Commission Expires: 2/14/09
Residing in Lake County, Indiana

Lisa E. Ward
Lisa Ward, Notary Public

This instrument was prepared by JUDITH A. KLOHA Patient Representative, The Community Hospital.

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