

RECORDED
LAKE COUNTY
FILED FEB 21 2002

2002 018256

2002 FEB 21 AM 9:05

MORTIMER J. CARTER
RECORDER

The Community Hospital
901 MacArthur Blvd.
Munster, Indiana 46321

RELEASE OF HOSPITAL LIEN

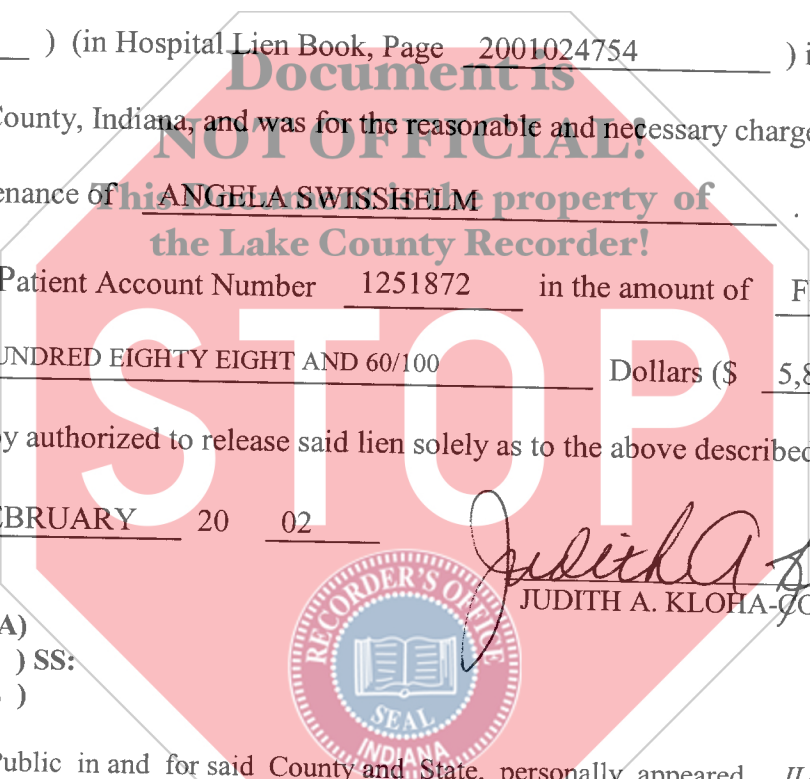
This is to certify that a certain claim by MUNSTER MEDICAL RESEARCH FOUNDATION



d/b/a THE COMMUNITY HOSPITAL against STATE FARM INSURANCE 2550 NORTHWESTERN
AVE WEST ALFAYETTE, IN 47906 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 26TH day of MARCH 20 01
and recorded on the 5TH day of APRIL 20 01 (as instrument No.

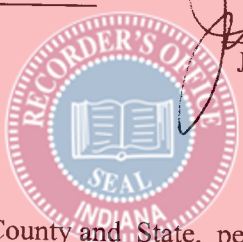
1251872) (in Hospital Lien Book, Page 2001024754) in the office of the
Recorder of LAKE County, Indiana, and was for the reasonable and necessary charges for hospital care,
treatment and maintenance of ANGELA SWISSHELM



Regarding Patient Account Number 1251872 in the amount of FIVE
THOUSAND EIGHT HUNDRED EIGHTY EIGHT AND 60/100 Dollars (\$ 5,888.60)

the Recorder is hereby authorized to release said lien solely as to the above described party this
8TH day of FEBRUARY 20 02

Judith A. Kloha
JUDITH A. KLOHA - COLLECTION CLERK



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

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 Ward
Lisa Ward, Notary Public

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

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SM
#389008