

2002 018259

STATE OF INDIANA  
LAKE COUNTY  
FILED RECORDER  
2002 FEB 21 AM 9:05

RECORDER

The Community Hospital  
901 MacArthur Blvd.  
Munster, Indiana 46321

**RELEASE OF HOSPITAL LIEN**



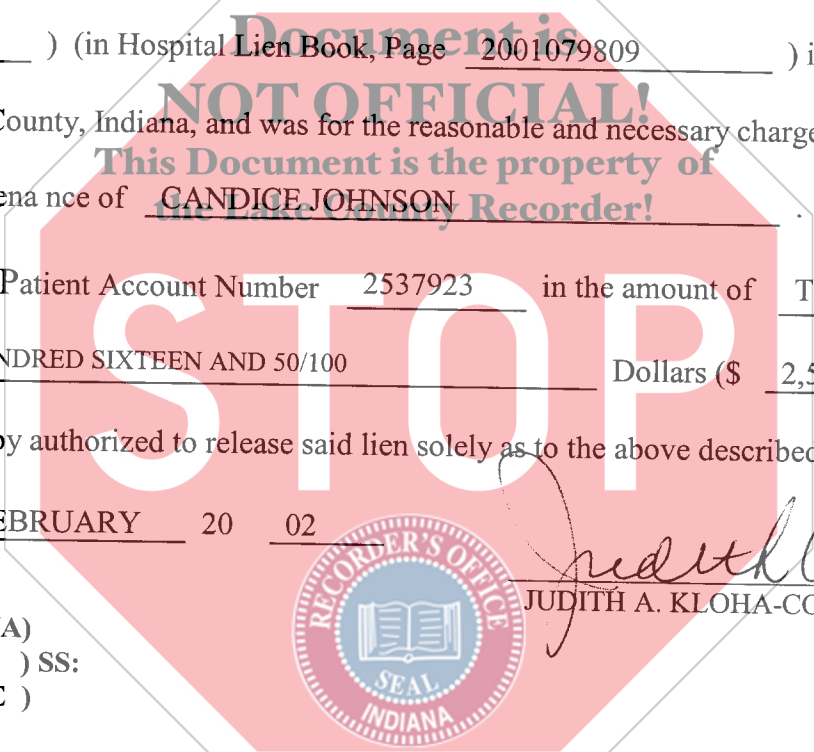
*This is to certify that a certain claim by MUNSTER MEDICAL RESEARCH FOUNDATION*

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

Intention to Hold Hospital Lien which was executed the 28<sup>TH</sup> day of SEPTEMBER 20 01  
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and recorded on the 2<sup>ND</sup> day of OCTOBER 20 01 (as instrument No.

2537923 ) (in Hospital Lien Book, Page 2001079809 ) 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 CANDICE JOHNSON



Regarding Patient Account Number 2537923 in the amount of TWO  
THOUSAND FIVE HUNDRED SIXTEEN AND 50/100 Dollars (\$ 2,516.50 )

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

8<sup>TH</sup> 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 8<sup>TH</sup> 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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SA  
#389008