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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 COMMERICAL UNION MIDWEST INS 7207
INDIANAPOLIS BLVD, HAMMOND, IN 46322 in connection with the Notice of
Intention to Hold Hospital Lien which was executed the 6TH day of NOVEMBER 20 01
and recorded on the 19 TH day of NOVEMBER 20 01 (as instrument No.
) (in Hospital Lien Book, Page 2001093874) 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 hiNORMAN WHITE the property of
Regarding Patient Account Number 2711001 in the amount of TWO
THOUSAND NINE HUNDRED TWELVE AND 25/100 Dollars (\$ 2,912.25)
the Recorder is hereby authorized to release said lien solely as to the above described party this
12TH day of FEBRUARY 20 02
(STATE OF INDIANA) () SS: (COUNTY OF LAKE)
JEAL
Before me, a Notary Public in and for said County and State, personally appeared <u>JUDITH A. KLOHA</u> , who acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal
this 12TH day of FEBRUARY 20 02 $(1/2)$
My Commission Expires: 2/14/09 Residing in Lake County, Indiana **Lisa Ward, Notary Public**

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

70. H 389338