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2002 MAY -1 PM 9:05

MUNSTER, INDIANA
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 16 W 84TH DRIVE
MERRILLVILLE, IN 46410 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 21ST day of FEBRUARY 20 02

and recorded on the 26TH day of FEBRUARY 20 02 (as instrument No.

2634767) (in Hospital Lien Book, Page 2002019827) 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 MARGARET JOHNSON.

Regarding Patient Account Number 2634767 in the amount of EIGHT

THOUSAND EIGHT HUNDRED FIFTY THREE AND 45/100 Dollars (\$ 8,853.45)

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

22ND day of APRIL 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 22ND day of APRIL 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.

J.A.
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