2002 042309

2007 MAY -6 71110: 21

GECURDER

## CERTIFICATE OF RELEASE

PATIENT NAME:

GEORGE P. FRENCL, SR.

DATE OF ADMISSION:

11/17/01

DATE OF DISCHARGE:

11/17/01

AMOUNT OF CLAIM:

\$1,275.37

HOSPITAL LIEN DOCKET NO:

2002 030508

Notice is hereby given that the Lien of St. Mary Medical Center pertaining to the above-named Patient has been

Authority is hereby given to the Recorder of Deeds to release the above referenced Hospital Lien, in accordance with the provisions of Indiana Code 32-8-26-7.

the Lake County Recorder!

St. Mary Medical Center

St. Mary Medical Center

cc:

Indiana Department Of Insurance 311 West Washington Street, Suite 300 Indianapolis, Indiana 46204-2787

This Instrument Prepared By:

The Law Offices Of James E. Daugherty 8550 Broadway Merrillville, Indiana 46410

(219) 769-5500