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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 SUPERIOR AMBULANCE 395 W LAKE STREET  
ELMHURST,IL 60126 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 26<sup>TH</sup> day of OCTOBER 20 01

and recorded on the 9<sup>TH</sup> day of NOVEMBER 20 01 (as instrument No.

2707217 ) (in Hospital Lien Book, Page 2001090872 ) 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 JANE KUBOW.

Regarding Patient Account Number 2707217 in the amount of TEN THOUSAND

EIGHT HUNDRED SIXTY SEVEN AND 35/100 Dollars (\$ 10/867.35 )

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

25<sup>TH</sup> 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 25<sup>TH</sup> day of APRIL 20 02

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.

*ch #393690  
10-13*