

LAKE COUNTY
FILED FOR REC'D

2002 050454

2002 MAY 31 PM 1:06

CERTIFICATE OF RELEASE
THOMAS W. CARTER
RECORDER

PATIENT NAME: JAMES BOR

DATE OF ADMISSION: 03/05/02

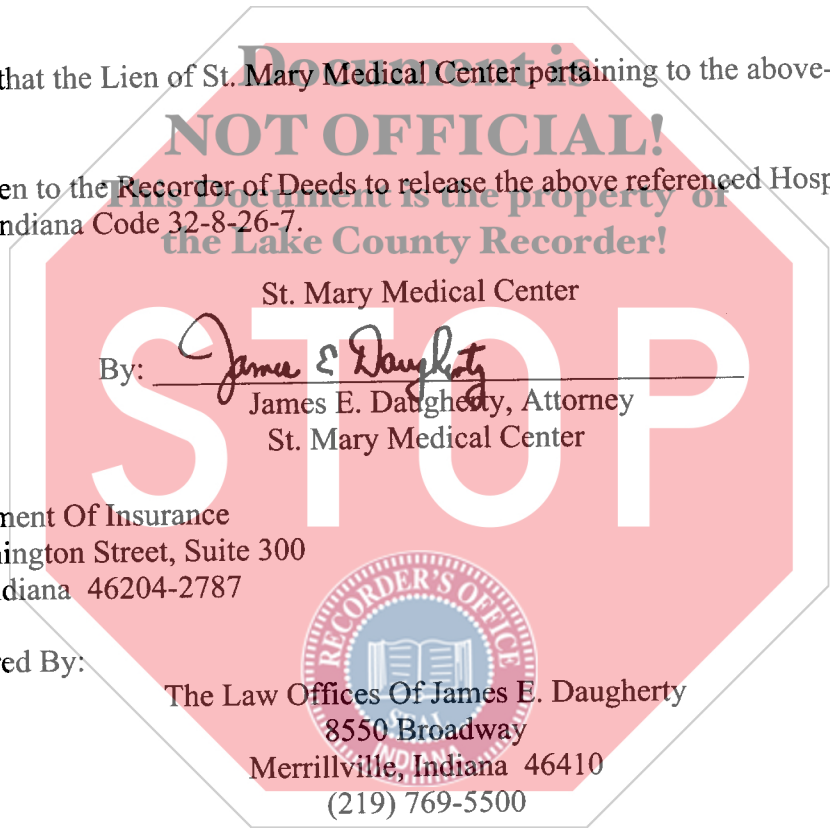
DATE OF DISCHARGE: 04/02/02

AMOUNT OF CLAIM: \$2,440.62

HOSPITAL LIEN DOCKET NO: 2002 038619

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

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.



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



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