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2002 OCT 11 10:04

**CERTIFICATE OF RELEASE**

LAKE COUNTY RECORDER

PATIENT NAME: Gerald Braxton

DATE OF ADMISSION: 06/24/02

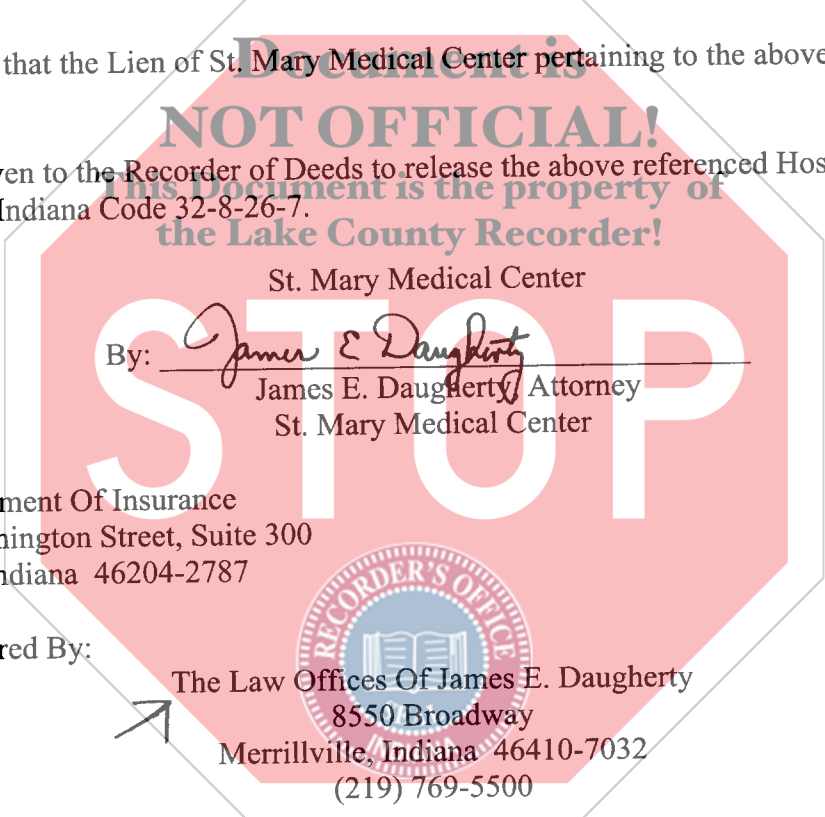
DATE OF DISCHARGE: 06/24/02

AMOUNT OF CLAIM: \$1,797.23

HOSPITAL LIEN DOCKET NO: 2002 064215

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:

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The Law Offices Of James E. Daugherty  
8550 Broadway  
Merrillville, Indiana 46410-7032  
(219) 769-5500

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