

The Community Hospital  
901 MacArthur Blvd.  
Munster, Indiana 46321

**RELEASE OF HOSPITAL LIEN**

2003 105650

This is to certify that a certain claim by MUNSTER MEDICAL RESEARCH FOUNDATION

d/b/a THE COMMUNITY HOSPITAL against PROGRESSIVE 7222 N. SHADELAND AVE.

INDIANAPOLIS, IN 46220 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 28<sup>TH</sup> day of JULY 20 03

and recorded on the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_ (as instrument No.

6478009 ) (in Hospital Lien Book, Page 2003-083168 ) 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 PATRICE LEDUC

Regarding Patient Account Number 6478009 in the amount of TWO THOUSAND

SIX HUNDRED NINE AND 00/100 Dollars (\$ 2,609.00 )

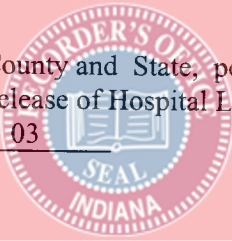
the Recorder is hereby authorized to release said lien solely as to the above described party this

22<sup>ND</sup> day of AUGUST 20 03

*Luann Kieltyka*  
LUANN KIELTYKA - COLLECTION CLERK

(STATE OF INDIANA)  
( ) SS:  
(COUNTY OF LAKE )

Before me, a Notary Public in and for said County and State, personally appeared LUANN KIELTYKA who acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal this 22<sup>ND</sup> day of AUGUST 20 03  
My Commission Expires: 2/14/09  
Residing in Lake County, Indiana



*Lisa Ward*  
Lisa Ward, Notary Public

This instrument was prepared by LUANN KIELTYKA, Patient Representative, The Community Hospital.

10.00  
LP

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