2003 107673

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 ALLSTATE, 105 E. JOLIET, SCHERERVILLE, IN 46375	
	in connection with the Notice of
Intention to Hold Hospital Lien which was executed the	15 TH day of AUGUST 20 02
and recorded on the 28 TH day of AUGUST	20 02 (as instrument No.
) (in Hospital Lien Book, Page	2002077161) 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 GINA STANINGER	ient is
Regarding Patient Account Number 4512691 in the amount of TWO THOUSAND SIX This Document is the property of	
HUNDRED TWENTY SEVEN AND 80/100e Lake County Recordollars (\$ 2,627.80)	
the Recorder is hereby authorized to release said lien solely as to the above described party this	
11 TH day of SEPTEMBER 20 03	Lunn Kiettyko
(STATE OF INDIANA) () SS:	LUANN KIELTYKA-COLLECTION CLERK
(COUNTY OF LAKE)	
Before me, a Notary Public in and for said County and State, personally appeared <u>LUANN KIELTYKA</u> who acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal this <u>11TH</u> day of SEPTEMBER 20 03	
My Commission Expires: 2/14/09 Residing in Lake County, Indiana	Lisa Ward, Notary Public

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

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