

STATE OF INDIANA  
LAKE COUNTY  
FILED OCT 16 2003

2003 110894

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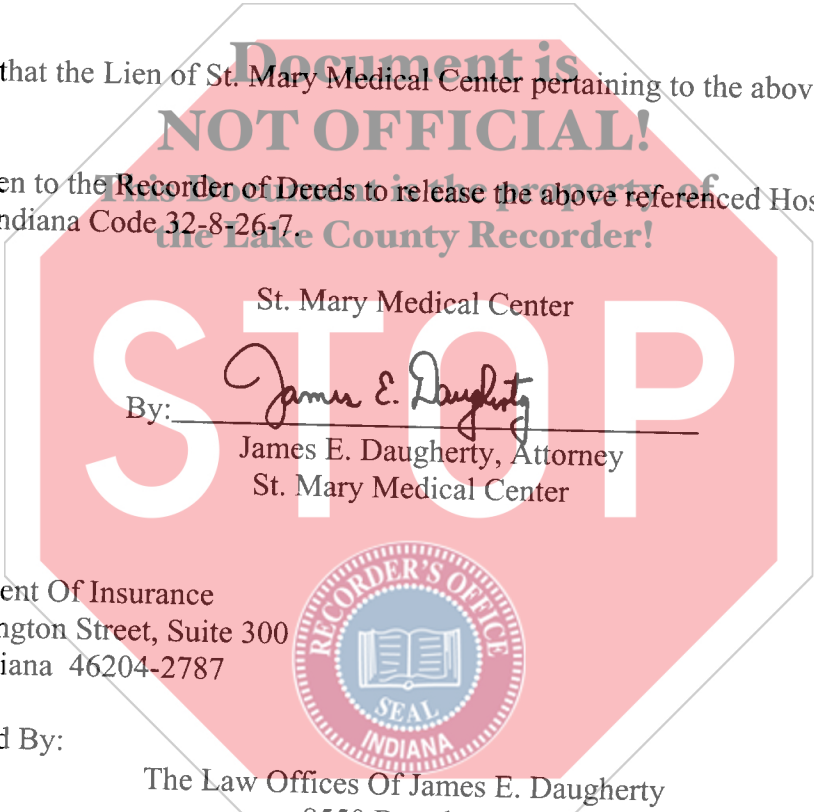
MAJORITY OF CLERK  
COUNTY

**CERTIFICATE OF RELEASE**

PATIENT NAME: Susan M. Whaley  
DATE OF ADMISSION: 11/21/02  
DATE OF DISCHARGE: 11/21/02  
AMOUNT OF CLAIM: \$6,279.48  
HOSPITAL LIEN DOCKET NO: 2003 038952

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.



By: James E. Daugherty  
James E. Daugherty, Attorney  
St. Mary Medical Center

cc: Indiana Department Of Insurance  
311 West Washington Street, Suite 300  
Indianapolis, Indiana 46204-2787

This Instrument Prepared By:

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