

2004 046345

2004 JUN - 3 AM S: 18

MORRIS WARRER RECORDER The Community Hospital 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 INSURANCE, PO BOX 85690,			
WESTLAND, MI 48185 CL # 1569117441	in connection with the Notice of		
Intention to Hold Hospital Lien which was executed the	_10 TH day	of MARCH	20 04
and recorded on the day of	20	(as instrument No	
) 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 OLGA HORVATH	TOTAT		
Regarding Patient Account Number in the amount of This Document is the property of			
HUNDRED SIXTY ONE AND 75/100 the Lake Count)
the Recorder is hereby authorized to release said lien solely as to the above described party this 5TH day of APRIL 20 04 (STATE OF INDIANA) () SS: (COUNTY OF LAKE) Before me, a Notary Public in and for said County and State, personally appeared LIL DOUGHTY who acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal this 5TH day of APRIL 20 04 My Commission Expires: 2/14/09 Residing in Lake County, Indiana Lisa Ward, Notary Public This instrument was prepared by LIL DOUGHTY Patient Representative. The Community Hospital			
This instrument was prepared by LIL DOUGHTY, Patient Representative, The Community Hospital.			

10.00 Le 518726