

LAKE COUNTY
FILED FOR RECORD

2004 046922

2004 APR 1 10:00 AM

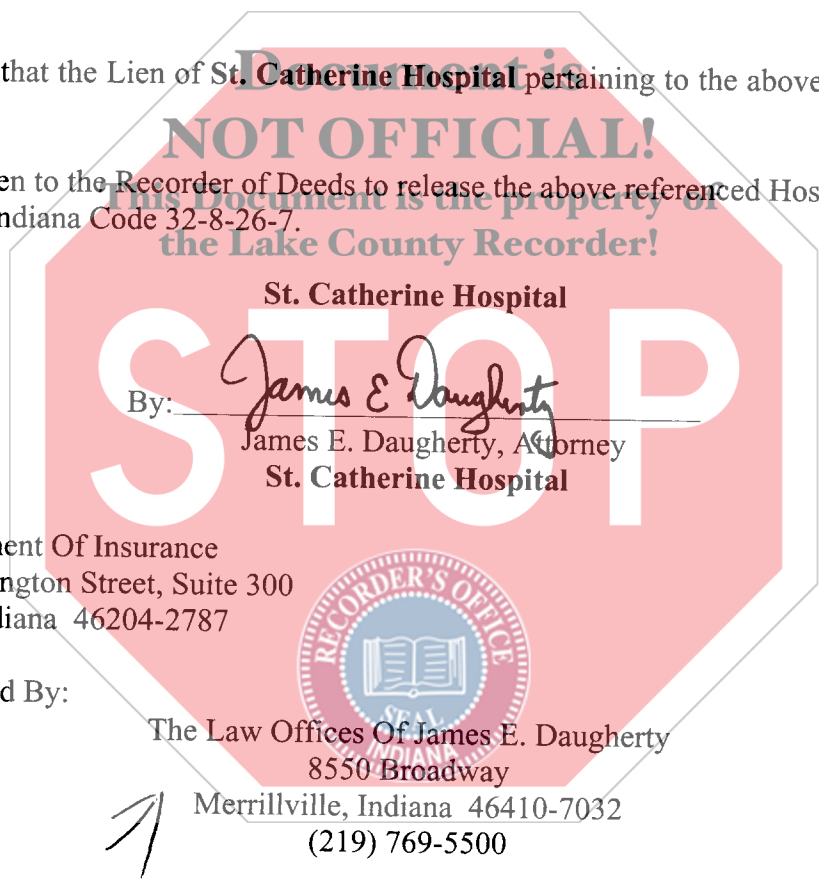
MERRILLVILLE, INDIANA
RECORDER OF DEEDS

CERTIFICATE OF RELEASE

PATIENT NAME: Janice Wright
DATE OF ADMISSION: 03/19/03
DATE OF DISCHARGE: 00/00/00
AMOUNT OF CLAIM: \$3,250.45
HOSPITAL LIEN DOCKET NO: 2003 075695

Notice is hereby given that the Lien of **St. Catherine Hospital** 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. Catherine Hospital

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

This Instrument Prepared By:
The Law Offices Of James E. Daugherty
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Merrillville, Indiana 46410-7032
(219) 769-5500

*OK 10:00
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