

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2005 115549

2005 DEC 30 PM 11: 51

MICHAEL A. BROWN
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 CLAIMS MANAGEMENT, 702 SW 8TH STREET,
BENTONVILLE, AR 72712 CL #L2841789 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 17TH day of DECEMBER 20 02
and recorded on the 2ND day of JANUARY 20 03 (as instrument No.
5099911) (in Hospital Lien Book, Page 2003000194) 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 IRENE OBOY

Regarding Patient Account Number 5099911 in the amount of FOURTEEN THOUSAND
NINE HUNDRED FIVE AND 55/100 Dollars (\$ 14,905.55)

the Recorder is hereby authorized to release said lien solely as to the above described party this
19TH day of DECEMBER 20 05

Christa Hacker
CHRISTA HACKER-PATIENT FINANCIAL SUPPORT

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

Before me, a Notary Public in and for said County and State, personally appeared CHRISTA HACKER who
acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal
this 19TH Day of DECEMBER 20 05
My Commission Expires: 2/14/09
Residing in Lake County, Indiana



Lisa Ward
Lisa Ward, Notary Public

This instrument was prepared by CHRISTA HACKER, Patient Representative, The Community Hospital.

10-
#025270
SS