

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2006 052607

2006 JUN 20 AM 11:58

MICHAEL A. BROWN  
RECORDER  
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 ST. PAUL TRAVELERS INSURANCE, P.O. BOX 3095,

NAPERVILLE, IL 60566 CL #LIM8999 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 3<sup>RD</sup> day of AUGUST 20 05

and recorded on the 10<sup>TH</sup> day of AUGUST 20 05 (as instrument No.

2874904 ) (in Hospital Lien Book, Page 2005067801 ) 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 CAROLE WRIGHT

Regarding Patient Account Number 2874904 in the amount of TWO THOUSAND

THREE HUNDRED FORTY EIGHT AND 00/100 Dollars (\$ 2,348.00 )

the Recorder is hereby authorized to release said lien solely as to the above described party this

5<sup>TH</sup> day of JUN 20 06

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

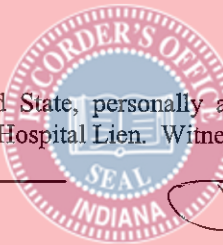
Christa Hacker  
CHRISTA HACKER-PATIENT FINANCIAL SUPPORT

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 5<sup>TH</sup> Day of JUNE 20 06

My Commission Expires: 02/14/09

Residing in Lake County, Indiana



Lisa Ward  
Lisa Ward, Notary Public

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

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