

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2007 052014

2007 JUN 26 PM 12: 15

MICHAEL A. BROWN
RECORDER

St. Catherine Hospital
4321 Fir Street
East Chicago, IN 46312

RELEASE OF HOSPITAL LIEN

This is to certify that a certain claim by ST. CATHERINE HOSPITAL

Against SAFECO INSURANCE CO., P.O. BOX 461,

ST. LOUIS, MO 63166 CL #137234892007 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 18TH day of MAY 20 06

and recorded on the 1ST day of JUNE 20 06 (as instrument No.

01448180) (in Hospital Lien Book, Page 2006046781) 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 SERENA GILHAM

Regarding Patient Account Number 01448180 in the amount of THREE THOUSAND

FOUR HUNDRED EIGHTY THREE AND 20/100 Dollars (\$ 3,483.20)

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

12TH day of JUNE 20 07

Christa Hacker

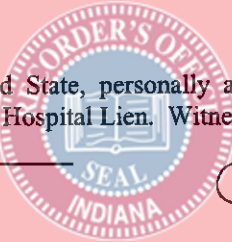
CHRISTA HACKER-PATIENT FINANCIAL SUPPORT

(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 12TH Day of JUNE 20 07

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, St. Catherine Hospital.

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