

2007 052827

STATE OF INDIANA
LAKE COUNTY
2007 JUN 20 PM 1:56

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 1413,

SOUTH BEND, IN 46624 CL #CIJ8059 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 28TH day of SEPTEMBER 20 05

and recorded on the 12TH day of OCTOBER 20 05 (as instrument No.

3221224) (in Hospital Lien Book, Page 2005089557) 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 DALTON CURTIS

Regarding Patient Account Number 3240928 in the amount of FOUR THOUSAND

FOUR HUNDRED SEVENTY NINE AND 00/100 Dollars (\$ 4,479.00)

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

19TH day of JUNE 20 07

(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 JUNE 20 07
My Commission Expires: 02/14/09
Residing in Lake County, Indiana

Christa Hacker
CHRISTA HACKER-PATIENT FINANCIAL SUPPORT
I affirm under the penalties for perjury, that I have taken reasonable
care to redact each Social Security number in this document, unless
required by law.

Lisa Ward
Lisa Ward, Notary Public

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

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