

LAKE COUNTY  
CLERK OF COURSE  
PUBLIC RECORDS

2008 065650

2008 SEP 18 AM 11:57

MUNSTER 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

CROWEL INSURANCE CO., 8244 KENNEDY AVENUE,

HIGHLAND, IN 46322

CL #304922384

in connection with the Notice of

Intention to Hold Hospital Lien which was executed the

14<sup>TH</sup>

day of

AUGUST

20 08

and recorded on the

27<sup>TH</sup>

day of

AUGUST

20 08

(as instrument No.

05703583

)

(in Hospital Lien Book, Page

2008060869

) 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

SUSAN KELLEY

Regarding Patient Account Number

05703583

in the amount of

TWO THOUSAND

FIFTY TWO AND 40/100

Dollars (\$

2,052.40

)

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

4<sup>TH</sup>

day of

SEPTEMBER

20

08

(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 4<sup>TH</sup> Day of SEPTEMBER 20 08

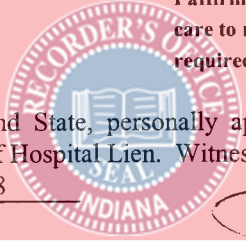
My Commission Expires: 02/14/09

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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