2008 067374

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2008 SEP 29 AM 8: 44

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 UNIVERS.	AL CASUALTY CO., 1150 NW POINT BLVD.,
SUITE 200, ELK GROVE VILLAGE, IL 60007 CL #55100004	in connection with the Notice of
Intention to Hold Hospital Lien which was executed the	20 <sup>TH</sup> day of DECEMBER 20 07
and recorded on the day of JANUARY	20 <u>08</u> (as instrument No.
05513605 ) (in Hospital Lien Book, Page	2008002397 ) 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 PAMELA SAUNDERS	'ICIAL!
Regarding Patient Account Number Docum 055136051 the Lake Count	
THREE HUNDRED THIRTY SIX AND 80/100	Dollars (\$ 6,336.80 )
the Recorder is hereby authorized to release said lien solely as to the above described party this  10 <sup>TH</sup> day of SEPTEMBER 20 08  Christa Hauthur	
(STATE OF INDIANA) ( ) SS: (COUNTY OF LAKE )	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.
Before me, a Notary Public in and for said County and State, personally appeared <u>CHRISTA HACKER</u> who acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal this <u>10<sup>TH</sup></u> Day of <u>SEPTEMBER</u> 20 <u>08</u> My Commission Expires: <u>02/14/09</u> Residing in Lake County, Indiana	

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

12-#0341W SS