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2009 APR 17 PH 2:00

MICHAEL A. SROWN 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 VIKING INSURANCE, 1025 BOULDERS PKWY., SUITE 100,
RICHMOND, VA 23225 CL #42A209914 in connection with the Notice of
Intention to Hold Hospital Lien which was executed the 20 TH day of FEBRUARY 20 08
and recorded on the 10 TH day of MARCH 20 08 (as instrument No.
09100416) (in Hospital Lien Book, Page 2008016958) 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 MARY PRITCHETT FFICIAL.
Regarding Patient Account Number Docum 09100416 in the amount of THREE THOUSAND
the Lake County Recorder! FIVE HUNDRED NINETY NINE AND 20/100 Dollars (\$ 3,599.20)
the Recorder is hereby authorized to release said lien solely as to the above described party this
7TH day of APRIL 20 09 Christa Harker
CHRISTA HACKER-PATIENT FINANCIAL SUPPORT
(STATE OF INDIANA) I affirm under the penalties for perjury, that I have taken reasonable
(care to redact each Social Security number in this document, unless (COUNTY OF LAKE)
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>7TH</u> Day of <u>APRIL</u> 20 09 My Commission Expires: <u>02/14/17</u> Residing in Lake County, Indiana Lisa Ward, Notary Public
This instrument was prepared by CHRISTA HACKER, Patient Representative, The Community Hospital.