

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2009 026015

2009 APR 23 AM 9: 27

MICHAEL A. BROWN  
RECORDER

St. Mary Medical Center  
1500 S. Lake Park Ave.  
Hobart, IN 46342

**RELEASE OF HOSPITAL LIEN**

*This is to certify that a certain claim by ST. MARY MEDICAL CENTER*

against

GEICO INSURANCE, ONE GEICO CENTER,

MACON, GA 31296 CL #0313346930101018 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 24<sup>TH</sup> day of FEBRUARY 20 09

and recorded on the 3<sup>RD</sup> day of MARCH 20 09 (as instrument No.

10334039 ) (in Hospital Lien Book, Page 2009013360 ) 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 JANET KIRALY

Regarding Patient Account Number 10334039 in the amount of FIVE THOUSAND

EIGHT HUNDRED FORTY EIGHT AND 52/100 Dollars (\$ 5,848.52 )

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

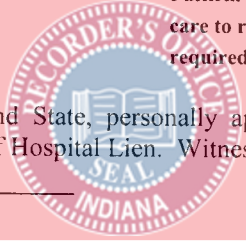
15<sup>TH</sup> day of APRIL 20 09

(STATE OF INDIANA)  
( ) SS:  
(COUNTY OF LAKE )

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.

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 15<sup>TH</sup> Day of APRIL 20 09  
My Commission Expires: 02/14/2017  
Residing in Lake County, Indiana



Lisa Ward  
Lisa Ward, Notary Public

This instrument was prepared by CHRISTA HACKER, Patient Representative, St. Mary Medical Center.

12-  
#0313346930101018  
SS