

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2009 056935

2009 AUG 19 AM 8:38

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

BLUE CROSS IL

P.O. BOX 1364

CHICAGO, IL 60690

CL #ATO305722141

in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 10TH day of SEPTEMBER 20 02

and recorded on the 17TH day of SEPTEMBER 20 02 (as instrument No.

9252347) (in Hospital Lien Book, Page 2002-083371) 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

DIANA J. SZANY

Regarding Patient Account Number

9252347

in the amount of

FIVE HUNDRED

TWENTY SIX AND 76/100

Dollars (\$ 526.76)

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

4TH day of AUGUST 20 09

Miranda Hill

MIRANDA HILL-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.

(STATE OF INDIANA)

() SS:

(COUNTY OF LAKE)

Before me, a Notary Public in and for said County and State, personally appeared MIRANDA HILL who acknowledged the execution of the foregoing Release of Hospital Lien. Witness my hand and Notarial Seal

this 4TH Day of AUGUST 20 09

My Commission Expires: 02/14/2017

Residing in Lake County, Indiana

Lisa E. Ward
Lisa E. Ward, Notary Public

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

12-
#037454
SS