

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2009 056996

2009 AUG 19 AM 8:41

MICHAEL A. BROWN
RECORDER

St. Catherine Hospital
4321 Fir Street
East Chicago, IN 46312

RELEASE OF HOSPITAL LIEN

This is to certify that a certain claim by ST. CATHERINE HOSITAL

against CRYSTAL WELCH 5020 INDIANAPOLIS BLVD.

EAST CHICAGO, IN 46312 CL #000299254 in connection with the Notice of

Intention to Hold Hospital Lien which was executed the 30TH day of OCTOBER 20 03

and recorded on the 3RD day of DECEMBER 20 03 (as instrument No.

1212329) (in Hospital Lien Book, Page 2003-127476) 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 CRYSTAL WELCH

Regarding Patient Account Number 1212329 in the amount of ONE THOUSAND

TWO HUNDRED NINETY SIX AND 85/100 Dollars (\$ 1,296.85)

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

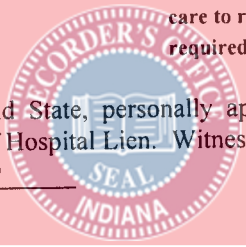
5TH day of AUGUST 20 09

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 5TH Day of AUGUST 20 09

My Commission Expires: 02/14/17

Residing in Lake County, Indiana

Lisa E. Ward

Lisa E. Ward, Notary Public

This instrument was prepared by CHRISTA HACKER, Patient Representative, St. Catherine Hospital.

12-
#037454
SS