

2009 066032

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2009 SEP 29 AM 11:39

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

SAFECO INSURANCE, P.O. BOX 515097,

LOS ANGELES, CA 90051

CL #389076793015

in connection with the Notice of

Intention to Hold Hospital Lien which was executed the

23RD

day of

JUNE

20 09

and recorded on the

7TH

day of

JULY

20 09

(as instrument No.

50190910

) (in Hospital Lien Book, Page

2009045945

) 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

HELEN KRAUS

Regarding Patient Account Number

50190910

in the amount of

ONE THOUSAND

FOUR HUNDRED SEVENTY FIVE AND 00/100

Dollars (\$

1,475.00

)

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

22ND

day of

SEPTEMBER

20

09

(STATE OF INDIANA)

() SS:

(COUNTY OF LAKE)

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 22ND Day of SEPTEMBER

20

09

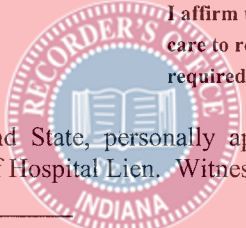
My Commission Expires: 02/14/17

Residing in Lake County, Indiana

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.



Lisa E. Ward

Lisa E. Ward, Notary Public

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

12th
037811
E Am