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**RELEASE OF RECORDED LIEN 2012 015643 DATED 2012 MAR 6**

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$20,000.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Ali Garcia that now exists against all parties, including Allstate Insurance, as a result of Ali Garcia's treatment, account number(s): 9212014064, 9212019755, 9212041824, 9212015953, 9212029882, 9212033303, 9212054373, 9212070919, 9212079937 treatment date(s) 01/26/2012, 02/04/2012, 03/12/2012, 01/30/2012, 02/22/2012, 02/28/2012-02/29/2012, 03/16/2012-03/31/2012, 04/01/2012-04/30/2012, 05/16/2012 arising out of an accident which occurred on or about 01/26/2012.

I have read the above Release and I hereunto set my hand and seal this 18<sup>th</sup> day of September, 2012.

St. Margaret - Hammond

BY: Neil J. Greene

Neil J. Greene  
Hospital Reimbursement Services, Inc.  
As Agent



STATE OF ILLINOIS )  
)SS  
COUNTY OF LAKE )

On this 18<sup>th</sup> day of September, 2012, before me personally came Neil Greene, known to me to be the individual who executed this Release and acknowledge that he fully understands its contents and freely executed same as his free and voluntary act.

Dawn M Fiorito

Lake County  
File No.: 12-27921, et al.

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