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2012 DEC 12 AM 10:42

MICHELLE R. FAJMAN
RECORDER

RELEASE OF RECORDED LIEN 2012 021381 DATED 2012 MAR 27

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$1,057.50, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Concetta Davis that now exists against all parties, including Mount Vernon Fire Insurance, as a result of **Concetta Davis's** treatment, account number(s): 9211155618, treatment date(s) 09/20/2011, arising out of an accident which occurred on or about 09/20/2011.

I have read the above Release and I hereunto set my hand and seal this 3rd day of

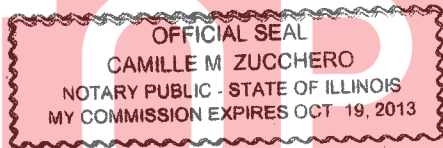
December, 2012.

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 3rd day of December, 2012, before me personally came Neil J. 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.



Camille M. Zucchero

Lake County
File No.: 11-20970

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