4.E OF INDIANA .AKE COUNTY ED FOR RECORD

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RELEASE OF RECORDED LIEN 2012 071303 DATED October 11, 2012

Hospital Reimbursement Services, Inc., agents for St. Anthony, Crown Point, for and in consideration of payment and/or benefits totaling \$1,222.36, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Jessica Miklos that now exists against all parties, including State Farm, as a result of Jessica Miklos's

treatment, account number: 612171833, treatment date: 09/08/2012, arising out of an accident which occurred on or about 09/08/2012. I have read the above Release and I hereunto set my hand and seal this I 4 day of , 2012. St. Anthony, Crown Point Neil J. Greene Hospital Reimbursement Services, Inc. As Agent Docume OFFICIAL SEAL the Lake CountCAMILLE M ZUCCHERO STATE OF ILLINOIS STATE OF ILLINOIS)SS COUNTY OF LAKE 14th day of On this 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. Lake County File No.: 12-40202 #12 CK# 215439 Cco