

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2013 016506

2013 MAR -5 AM 8: 36

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2013 007368 DATED January 29, 2013

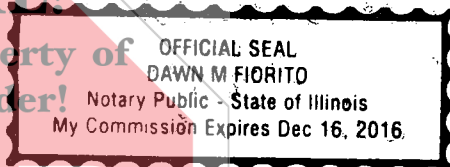
Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$3,963.06, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Patrick Wetnight that now exists against all parties, including State Farm, as a result of **Patrick Wetnight's** treatment, account number: 212219278, treatment dates: 12/15/2012 - 12/16/2012, arising out of an accident which occurred on or about 12/15/2012.

I have read the above Release and I hereunto set my hand and seal this 22nd day of

February, 2013.

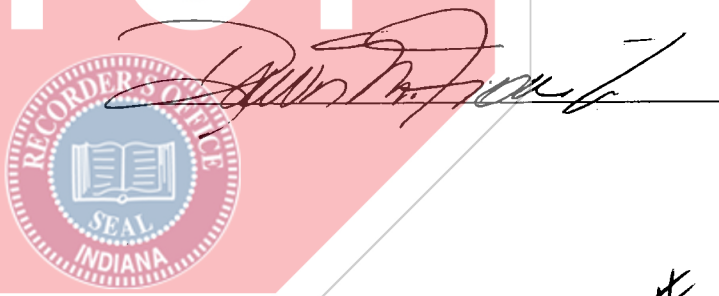
St. Margaret - Hammond

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



STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)

On this 22nd day of February, 2013, 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.: 12-47719

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