

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2013 016507

2013 MAR -5 AM 8:36

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2012 041845 DATED June 25, 2012

Hospital Reimbursement Services, Inc., agents for St. Anthony, Crown Point, for and in consideration of payment and/or benefits totaling \$1,351.06, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Matthew T Bradley that now exists against all parties, including Farm Bureau, as a result of **Matthew T Bradley's** treatment, account number: 9612079451, treatment date: 05/25/2012, arising out of an accident which occurred on or about 05/25/2012.

I have read the above Release and I hereunto set my hand and seal this 25th day of

February, 2013.

St. Anthony, Crown Point

BY: Neil J. Greene

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

STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)



On this 25th 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.

Camille M. Zucchero

Lake County
File No.: 12-33706



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