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2013 MAR 12 AM 8:56

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2013 005891 DATED January 23, 2013

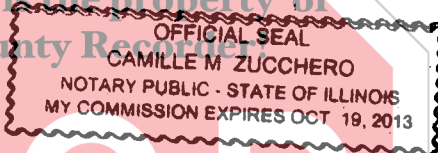
Hospital Reimbursement Services, Inc., agents for St. Margaret - Dyer, for and in consideration of payment and/or benefits totaling \$3,020.45, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Beau M. Stricklin that now exists against all parties, including Abbasi, as a result of **Beau M. Stricklin's** treatment, account number: 212207178, treatment date: 11/26/2012, arising out of an accident which occurred on or about 11/26/2012.

I have read the above Release and I hereunto set my hand and seal this 8th day of March, 2013.

St. Margaret - Dyer,

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

STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)



On this 8th day of March, 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.: 12-46720



Camille M. Zucchero

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