STATE OF INDIAGES LAKE COUNTY FILED FOR RECORD

2013 022086

2013 MAR 26 AM 8: 40

MICHAEL B. DROWK RECORDER

## RELEASE OF RECORDED LIEN 2012 029837 DATED 2012 MAY 3

Hospital Reimbursement Services, Inc., agents for St. Anthony, Crown Point, for and in consideration of payment and/or benefits totaling \$5,837.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Ralph Frampton that now exists against all parties, including Country Financial, as a result of Ralph Frampton's treatment, account number(s): 9612028491, 612194121, treatment date(s)

02/19/2012, 10/23/2012, arising out of an accident which occurred on or about 02/19/2012.
I have read the above Release and I hereunto set my hand and seal this 20 day of
March ,2013.
St. Anthony, Crown Point
BY: New Document 18
Neil J. Greene ORRICIAL Hospital Reimbursement Services, Inc.
As Agent is Document is the property of the Lake County Rofficial seal
STATE OF ILLINOIS ) CAMILLE M ZUCCHERO NOTARY PUBLIC - STATE OF ILLINOIS
COUNTY OF LAKE ) MY COMMISSION EXPIRES OCT 19, 2013
On this 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.
ins free and voluntary act.
Lake County
File No.: 12-29723/13-51334
File No.: 12-29723/13-51334  CK# 12  CK# 42  CK# 42
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