

2013 048226

2013 JUL -2 AM 10: 57

MICHAEL B. BROWN  
RECORDER

**RELEASE OF RECORDED LIEN 2013 045244 DATED June 19, 2013**

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$1,913.25, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Yvonne Trebble that now exists against all parties, including Progressive Insurance, as a result of **Yvonne Trebble's** treatment, account number: 213081952, treatment date: 05/20/2013, arising out of an accident which occurred on or about 05/20/2013.

I have read the above Release and I hereunto set my hand and seal this 26<sup>th</sup> day of

June, 2013.

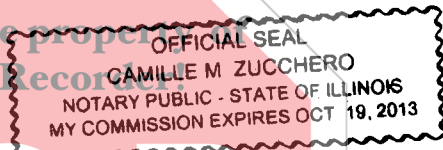
St. Margaret - Hammond

BY:

*Neil J. Greene*

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

STATE OF ILLINOIS )  
)SS  
COUNTY OF LAKE )



On this 26<sup>th</sup> day of June, 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.: 13-57684



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