

2013 051191

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2013 JUL 16 AM 8:45

MICHAEL B. BROWN  
RECORDER

**RELEASE OF RECORDED LIEN 2013 003441 DATED 2013 JAN 15**

Hospital Reimbursement Services, Inc., agents for St. Margaret - Dyer, for and in consideration of payment and/or benefits totaling \$4,302.05, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Larry Howery that now exists against all parties, including Allstate, as a result of **Larry Howery's** treatment, account number(s): 212202642, treatment date(s) 11/17/2012, arising out of an accident which occurred on or about 11/17/2012.

I have read the above Release and I hereunto set my hand and seal this 11<sup>th</sup> day of

July, 2013.

St. Margaret - Dyer

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

OFFICIAL SEAL  
DAWN M FIORITO  
Notary Public - State of Illinois  
My Commission Expires Dec 16, 2016

STATE OF ILLINOIS )  
)SS  
COUNTY OF LAKE )

On this 11<sup>th</sup> day of July, 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.: 12-45405



AMOUNT \$ 12-  
CASH \_\_\_\_\_ CHARGE \_\_\_\_\_  
CHECK # 275709  
OVERAGE \_\_\_\_\_  
COPY \_\_\_\_\_  
NON-COM \_\_\_\_\_  
CLERK KC

E