

2013 053480

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2013 JUL 23 AM 8:33

MICHAEL B. BROWN  
RECORDER

**RELEASE OF RECORDED LIEN 2012 040302 DATED 2012 JUN 19**

Hospital Reimbursement Services, Inc., agents for St. Margaret - Dyer, for and in consideration of a prior payment and/or benefit totaling \$1,285.00 and payment and/or benefits totaling \$150.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Filimon Deluna that now exists against all parties as a result of **Filimon Deluna's** treatment, account number(s): 9212078193, treatment date(s) 05/13/2012, arising out of an accident which occurred on or about 05/13/2012.

I have read the above Release and I hereunto set my hand and seal this 17<sup>th</sup> day of

July, 2013.

St. Margaret - Dyer

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

STATE OF ILLINOIS )  
)SS  
COUNTY OF LAKE )

OFFICIAL SEAL  
CAMILLE M ZUCCHERO  
NOTARY PUBLIC - STATE OF ILLINOIS  
MY COMMISSION EXPIRES OCT 19, 2013

On this 17<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.: 12-33083



Camille M. Zuccherero

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