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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2013 091821

2013 DEC 17 AM 8:44

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2011 062518 DATED November 8, 2011

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling $1,864.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Nickolas S Szpak that now exists against all parties, including Allstate Insurance, as a result of **Nickolas S Szpak**'s treatment, account numbers: 9211159410, 9211160559, treatment dates: 09/27/2011, 09/29/2011, arising out of an accident which occurred on or about 09/27/2011.

I have read the above Release and I hereunto set my hand and seal this 10th day of December, 2013.

St. Margaret - Hammond

BY: Neil J. Greene

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

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STOP

STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)

OFFICIAL SEAL
CAMILLE M ZUCCHERO
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:10/19/17

On this 10th day of December, 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

RECORDER'S OFFICE SEAL INDIANA

Lake County
File No.: 11-21609, 11-21612

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