

2014 008031

2014 FEB 11 AM 9:27

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2013 093823 DATED December 26, 2013

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$722.25, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Medric Pridgeon that now exists against all parties, including American Family Insurance, as a result of **Medric Pridgeon's** treatment, account number: 213267473, treatment date: 11/30/2013, arising out of an accident which occurred on or about 11/30/2013.

I have read the above Release and I hereunto set my hand and seal this 5th day of

February, 2014.

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 5th day of February, 2014, 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.: 13-68386



Camille M. Zuccherro

\$ 12
CK#
275927
C
E