

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2014 025831

2014 MAY -8 AM 8:36

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2013 091809 DATED December 17, 2013

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$1,423.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Billy Rush that now exists against all parties, including Founders Insurance, as a result of **Billy Rush's** treatment, account number: 213254852, treatment date: 11/17/2013, arising out of an accident which occurred on or about 11/17/2013.

I have read the above Release and I hereunto set my hand and seal this 30th day of

April, 2014.

St. Margaret - Hammond

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: 10/19/17

On this 30th day of April, 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.: 13-67731



Camille M. Zucchero

12-00
276029
pp