

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2014 051098

2014 AUG 26 AM 9:17

MICHAEL D. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2014 044691 DATED 2014 JUL 29

Hospital Reimbursement Services, Inc., agents for St. Anthony Hospital, Crown Point does release and discharge the Hospital Lien of Telisha N. Howard that now exists against all parties, including Sentry Insurance, as a result of **Telisha N. Howard's** treatment, account number(s): 614101155, treatment date(s) 06/25/2014, arising out of an accident which occurred on or about 06/25/2014.

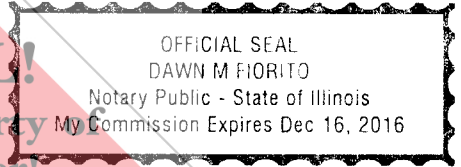
I have read the above Release and I hereunto set my hand and seal this 21st day of

August, 2014.

St. Anthony Hospital, Crown Point

BY: Neil J. Greene

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



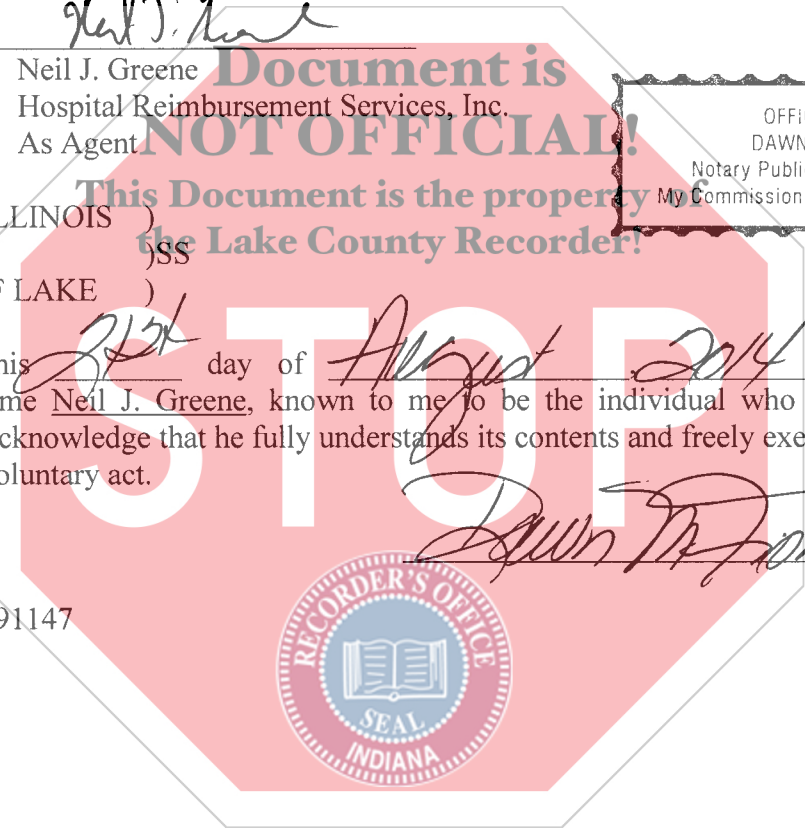
STATE OF ILLINOIS)

COUNTY OF LAKE)

On this 21st day of August 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.

Dawn M. Fiorito

Lake County
File No.: 14-91147



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