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MICHAEL 3. BROWN RELEASE OF RECORDED LIEN 2013 062933 DRIEDRES 27, 2013

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$2,957.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Oscar P Sanmiguel that now exists against all parties, as a result of **Oscar P Sanmiguel**'s treatment, account number: 213153239, treatment date: 08/04/2013, arising out of an accident which occurred on or about 08/03/2013.

I have read the above Release and I hereunto set my hand and seal this I/ day of St. Margaret - Hammond BY: Michelle Feldman, Vice President Client Services
Hospital Reimbursement Services, Inc. As Agent Document is the property OFFICIAL SEAL STATE OF ILLINOIS the Lake County Recorder! CAMILLE M ZUCCHERO NOTARY PUBLIC - STATE OF ILLINOIS COUNTY OF LAKE On this day of 2014, before me personally came Michelle Feldman, known to me to be the individual who executed this Release and acknowledge that she fully understands its contents and freely executed same as her free and voluntary act. Lake County File No.: 13-61824 120kg