

2015 059418

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2015 SEP -2 AM 8:34

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2015 050472 DATED 2015 AUG 4

Hospital Reimbursement Services, Inc., agents for St. Margaret - Dyer, for and in consideration of payment and/or benefits totaling \$2,494.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Marko Kukolj that now exists against all parties, including Unique Insurance and Grange Insurance, as a result of **Marko Kukolj's** treatment, account number: 215176874, treatment date: 07/11/2015, arising out of an accident which occurred on or about 07/11/2015.

I have read the above Release and I hereunto set my hand and seal this 26th day of

August, 2015.

St. Margaret - Dyer

BY:

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

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

STATE OF ILLINOIS)

)SS

COUNTY OF LAKE)

On this 26th day of August, 2015, before me personally came Neil J. Greene, As Agent for St. Margaret - Dyer, known to me to be the individual who executed this Release and acknowledge that he/she fully understands its contents and freely executed same as his/her free and voluntary act.

Lake County
File No.: 15-128474



Camille M. Zucchero

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