

2015 072512

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2015 OCT 27 AM 9:25

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2013 040585 DATED 2013 JUN 4

Hospital Reimbursement Services, Inc., agents for St. Margaret - Dyer, for and in consideration of payment and/or benefits totaling \$883.50, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Adan Melero that now exists against all parties, as a result of Adan Melero's treatment, account number: 213033904, treatment date: 03/02/2013, arising out of an accident which occurred on or about 03/01/2013.

I have read the above Release and hereunto set my hand and seal this 20th day of

October

St. Margaret - Dyer

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 20th day of October, 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.

Camille M. Zuccherro

Lake County
File No.: 13-52311

M. Z
\$12.00
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