

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2015 072515

2015 OCT 27 AM 9:25

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2014 051137 DATED 2014 AUG 26

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of a prior payment and/or benefit totaling \$1,379.00 and payment and/or benefits totaling \$200.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Yvette Cobbs that now exists against all parties as a result of Yvette Cobbs's treatment, account number(s): 214167700, treatment date(s) 06/21/2014, arising out of an accident which occurred on or about 06/21/2014.

Document is NOT OFFICIAL!
This Document is the property of the Lake County Recorder!

I have read the above Release and I hereunto set my hand and seal this 22nd day of October, 2015.

St. Margaret - Hammond

BY:

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

OFFICIAL SEAL
DAWN M FIORITO
Notary Public - State of Illinois
My Commission Expires Dec 16, 2016

STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)



On this 22nd day of October, 2015, before me personally came Neil J. Greene, As Agent of St. Margaret - Hammond, 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.: 14-89194

\$12.00
m.e
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