

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2016 037189

2016 JUN 16 AM 9:37

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2016 025058 DATED 2016 APR 26

Hospital Reimbursement Services, Inc., agents for St. Margaret - Dyer, for and in consideration of payment and/or benefits totaling \$5,286.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Stacey E Taylor that now exists against all parties, including State Farm, as a result of **Stacey E Taylor's** treatment, account numbers: 216061398, 216096408, treatment dates: 03/03/2016-03/31/2016, 04/04/2016-04/30/2016, arising out of an accident which occurred on or about 02/22/2016.

I have read the above Release and I hereunto set my hand and seal this 7th day of June, 2016.
This Document is the property of Lake County Recorder!

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 7th day of June, 2016, 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.: 16-155697, 16-158148

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