STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2016 038101

2016 JUN 21 AM 8: 47

MICHAEL B. BROWN RECORDER

RELEASE OF RECORDED LIEN 2015 057473 DATED 2015 AUG 24

Hospital Reimbursement Services, Inc., agents for St. Margaret - Dyer, for and in consideration of payment and/or benefits totaling \$6,565.60, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Delanie Doyle that now exists against all parties, including State Farm Insurance, as a result of Delanie Doyle's treatment, account number(s): 215201403, treatment date(s) 08/07/2015, arising out of an accident which occurred on or about 08/07/2015.

hereunto set my hand and seal this 13 day of I have read the above Release a June This Document is the property of the Lake County Recorder! St. Margaret - Dyer BY: Neil J. Greene Hospital Reimbursement Services, Inc. OFFICIAL SEAL As Agent DAWN M FIORITO Notary Public - State of Illinois My Commission Expires Dec 16, 2016 STATE OF ILLINOIS)SS COUNTY OF LAKE On this 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.: 15-130703

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