

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2016 054345

2016 AUG 10 AM 8:43

MICHAEL B. BROWN  
RECORDER

**RELEASE OF RECORDED LIEN 2014 079812 DATED 2014 DEC 16**

Hospital Reimbursement Services, Inc., agents for St. Margaret - Dyer, for and in consideration of payment and/or benefits totaling \$7,283.53, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Adam Karr that now exists against all parties, including Martin Karr and Geico Insurance, as a result of **Adam Karr's** treatment, account number(s): 214301596, treatment date(s) 11/11/2014 -- 11/12/2014, arising out of an accident which occurred on or about 11/11/2014.

I have read the above Release and hereunto set my hand and seal this 2<sup>nd</sup> day of

August

**This Document is the property of  
the Lake County Recorder!**

St. Margaret - Dyer

BY:

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

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 2<sup>nd</sup> day of August, 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. Zucchero

Lake County  
File No.: 14-105474

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