

2016 057462

STATE OF ILLINOIS
LAKE COUNTY
FILED FOR RECORD

2016 AUG 24 AM 9: 37

MICHAEL J. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2013 022077 DATED 2013 MAR 26

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$718.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Catherine Frazier that now exists against all parties, including United Auto Insurance and Great West Casualty, as a result of **Catherine Frazier's** treatment, account number(s): 213025640, treatment date(s) 02/15/2013, arising out of an accident which occurred on or about 02/15/2013.

I have read the above Release and I hereunto set my hand and seal this 16th day of

August, 2016.

St. Margaret - Hammond

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

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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 16th day of August 2016 before me personally came Neil J. Greene, 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.

Lake County
File No.: 13-51844



[Handwritten signature]

*Ch. 12. - E
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