

STATE OF ILLINOIS  
LAKE COUNTY  
FILED FOR RECORD

2016 057463

2016 AUG 24 AM 9:37

MICHAEL B. BROWN  
RECORDER

**RELEASE OF RECORDED LIEN 2013 022078 DATED 2013 MAR 26**

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$1,027.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Clifford Frazier that now exists against all parties, including United Auto Insurance and Great West Casualty, as a result of **Clifford Frazier's** treatment, account number(s): 213025644, treatment date(s) 02/15/20103, 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 16<sup>th</sup> 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 16<sup>th</sup> 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.: 13-51821



Dawn M Fiorito

CK-276913  
12-16  
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