

STATE OF ILLINOIS
LAKE COUNTY
FILED FOR RECORD

2016 075184

2016 NOV -8 AM 8:45

MICHAEL D. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2016 062985 DATED 2016 SEP 14

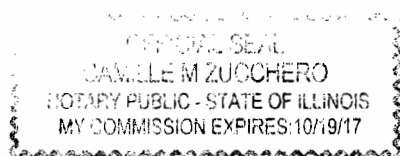
Hospital Reimbursement Services, Inc., agents for Franciscan Alliance Munster, for and in consideration of payment and/or benefits totaling \$858.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Fiona Murray that now exists against all parties, including Allstate Insurance, as a result of **Fiona Murray's** treatment, account number: 216277990, treatment date: 08/23/2016, arising out of an accident which occurred on or about 08/23/2016.

I have read the above Release and I hereunto set my hand and seal this 2nd day of November, 2016.

Franciscan Alliance Munster

BY: Neil J. Greene

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



STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)

On this 2nd day of November, 2016, before me personally came Neil J. Greene, As Agent for Franciscan Alliance Munster, 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.: 16-168577

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