

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2017 008211

2017 FEB -7 AM 8:39

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2016 060672 DATED 2016 SEP 7

Hospital Reimbursement Services, Inc., agents for St. Margaret - Dyer, for and in consideration of payments and/or benefits totaling \$1,627.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Marlon Wilson that now exists against all parties, including National Indemnity Insurance, as a result of **Marlon Wilson's** treatment, account number: 216229066 treatment date: 07/12/2016, arising out of an accident which occurred on or about 07/12/2016.

I have read the above Release and I hereunto set my hand and seal this 31st day of

January

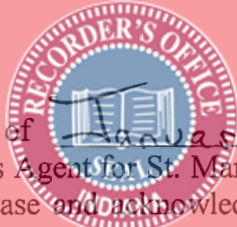
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the Lake County Recorder!**

St. Margaret - Dyer

BY:

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

STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)



On this 31st day of January, 2017, 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.: 16-165043

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