STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 011999

2017 FEB 28 AM 9: 07

MICHAEL B. BROW.

RELEASE OF RECORDED LIEN 2010 004045 DATED 2010 JAN 22

Hospital Reimbursement Services, Inc., agents for St. Margaret Mercy North, for and in consideration of payment and/or benefits totaling \$1,800.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Sergio Alverez that now exists against all parties, including State Farm Auto Claims Central / IL, as a result of Sergio Alverez's treatment, account number(s): 0209193612, treatment date(s) 11/06/2009.

I have read the above Release and I hereunto set my hand and seal this Aday of Camille Zucchero, Clent Manager
Hospital Reimbursement Services, Inc.

As Agent

Document is

I have read the above Release and I hereunto set my hand and seal this Aday of the Lake County Recorder!

St. Margaret Mercy North

Camille Zucchero, Clent Manager
Hospital Reimbursement Services, Inc.

As Agent

STATE OF ILLINOIS

)SS

COUNTY OF LAKE

On this day of the personally came Camine Zucchero, As Agent for St. Margaret Mercy North, 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.

Lake County

File No.: 14-71256

10.00

Official Seal Notary Public - State of Illinois My Commission Expires Dec 16, 2020

#12.00 M. Z A77086