

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2017 041184

2017 JUL -5 AM 8:40

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2017 037692 DATED 06/21/2017

Hospital Reimbursement Services, Inc., agents for Franciscan Health Crown Point, for and in consideration of payment and/or benefits totaling \$2,426.55, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Michael Gradziel that now exists against all parties, as a result of **Michael Gradziel's** treatment, account number: 617080527 treatment date: 05/09/2017, arising out of an accident which occurred on or about 05/09/2017.

I have read the above Release and hereunto set my hand and seal this 21st day of

June

**This Document is the property of
the Lake County Recorder!**

Franciscan Health/Crown Point

BY:

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



STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)

On this 21st day of June, 2017, before me personally came Neil J. Greene, As Agent for Franciscan Health Crown Point, 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.



Dawn M Fiorito

Lake County
File No.: 17-190536

\$25.00
277211
AS