STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 JUL -5 AM 8: 40

MICHAEL B. BROWN RECORDER

2017 041185

RELEASE OF RECORDED LIEN 2012 091392 DATED 12/27/12

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$1,100.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Billy Bryant that now exists against all parties, including National Interstate Insurance, as a result of Billy Bryant's treatment, account number(s): 212205316 treatment date(s) 11/21/2012-11/22/2012, arising out of an accident which occurred on or about 11/21/2012.

my hand and seal this day of I have read the above This Document is the property of the Lake County Recorder! St. Margaret,- Hammond BY: Neil J. Greene DAWN M FIORITO Hospital Reimbursement Services, Inc. Official Seal As Agent Notary Public - State of Illinois My Commission Expires Dec 16, 2020 STATE OF ILLINOIS SS COUNTY OF LAKE before me On this personally came Neil J. Greene, As Agen for St. Magaret - Hammond, known to me to be the individual who executed this Release wolarch sowledge that he/she fully understands its contents and freely executed same as his her free and voluntary act. Lake County

File No.: 12-46457

\$25,00