

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2017 041186

2017 JUL -5 AM 8:40

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2012 091393 DATED 12/27/12

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$600.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Rosie Bryant that now exists against all parties, including National Interstate Insurance, as a result of **Rosie Bryant's** treatment, account number(s): 212205318 treatment date(s) 11/21/2012-11/22/2012, arising out of an accident which occurred on or about 11/21/2012.

I have read the above Release and hereunto set my hand and seal this 27th day of

June

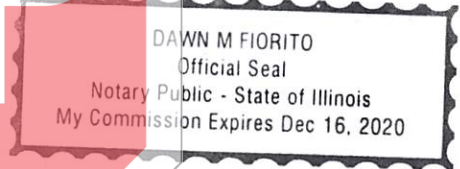
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the Lake County Recorder!**

St. Margaret - Hammond

BY:

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

STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)



On this 27th day of June, 2017, before me personally came Neil J. Greene, As Agent for St. Margaret - Hammond, 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.: 12-46462

\$25.00
#277211
JB