

2017 046843

2017 JUL 28 AM 9:42

MICHAEL B. BROY
RECORDER

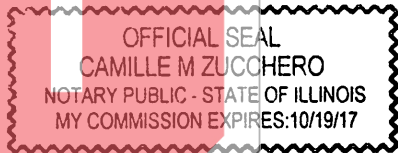
RELEASE OF RECORDED LIEN 2012 071304 DATED 10/11/2012

Hospital Reimbursement Services, Inc., agents for St. Margaret - Dyer, for and in consideration of payment and/or benefits totaling \$2,828.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Kimberly Greer that now exists against all parties, including Allstate, as a result of Kimberly Greer's treatment, account number: 212143714 treatment date: 08/06/2012, arising out of an accident which occurred on or about 08/04/2012.

I have read the above Release and hereunto set my hand and seal this 28th day of July, 2017.
Document is NOT OFFICIAL!
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St. Margaret - Dyer

BY: [Signature]
Dawn Fiorito - Client Manager
Hospital Reimbursement Services, Inc.
As Agent



STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)



On this 28th day of July, 2017, before me personally came Dawn Fiorito, 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.

[Signature]

Lake County
File No.: 12-37766

AMOUNT \$ 25.00
CASH CHARGE
CHECK# 277233
COVERAGE
COPY
NON-DONE
FEE/DEPUTY 173