

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2017 069124

2017 OCT 12 AM 9:52

MICHAEL B. BROWN
RECORDER

RELEASE OF RECORDED LIEN 2016 057460 DATED 08/24/2016

Hospital Reimbursement Services, Inc., agents for Franciscan Alliance Munster, for and in consideration of payment and/or benefits totaling \$6,228.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Sheri L Minkema that now exists against all parties, including State Farm, as a result of Sheri L Minkema's treatment, account number: 216246912 treatment date: 08/06/2016, arising out of an accident which occurred on or about 07/27/2016.

I have read the above Release and hereunto set my hand and seal this 3rd day of

October

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

Franciscan Alliance Munster

BY:

Neil J. Greene

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

STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)



On this 3rd day of October, 2017, before me personally came Neil J. Greene, As Agent for Franciscan Alliance Munster, 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.

Camille M. Zucchero

Lake County
File No.: 16-166941

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