

2017 085037

2017 DEC 14 AM 9:47

MICHAEL B. BROWN  
RECORDER

**RELEASE OF RECORDED LIEN 2015071920 DATED 10/23/15**

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$1,700.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Fannie Bounds that now exists against all parties, including Geico Insurance, as a result of Fannie Bounds's treatment, account number(s): 215229368 treatment date(s) 09/02/2015, arising out of an accident which occurred on or about 09/01/2015.

I have read the above Release and thereunto set my hand and seal this 7<sup>th</sup> day of

December, 2017. This Document is the property of  
the Lake County Recorder!

St. Margaret - Hammond

BY:

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

DAWN M FIORITO  
Official Seal  
Notary Public - State of Illinois  
My Commission Expires Dec 16, 2020

STATE OF ILLINOIS )  
                                  )SS  
COUNTY OF LAKE )

On this 7<sup>th</sup> day of December, 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.

Lake County  
File No.: 15-133222

25-15  
OK-277377  
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