STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 085039

2017 DEC 14 AM 9: 47

MICHAEL B. BROWN

## RELEASE OF RECORDED LIEN 2014 014705 DATE DO 63/E8/14

Hospital Reimbursement Services, Inc., agents for St. Margaret - Dyer, for and in consideration of payment and/or benefits totaling \$2,610.03, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Antonio Sanders that now exists against all parties, including American Freedom Insurance, as a result of Antonio Sanders's treatment, account number(s): 214028494 treatment date(s) 02/04/2014, arising out of an accident which occurred on or about 02/03/2014.

Thereunto set my hand and seal this 7 day of I have read the above Release and This Document is the property of the Lake County Recorder! St. Margaret - Dyer BY: Neil J. Greene Hospital Reimbursement Services, Inc. DAWN M FIORITO As Agent Official Seal Notary Public - State of Illinois STATE OF ILLINOIS My Commission Expires Dec 16, 2020 )SS COUNTY OF LAKE before me On this personally came Neil J. Greene, 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. Lake County

File No.: 14-73653

d. 277377