STATE OF INDIANA
LAKE COUNTY FILED FOR RECORD

2017 085042

2017 DEC 14 AM 9: 47

MICHAEL B. BROWN RECORDER

RELEASE OF RECORDED LIEN 2017019941 DATED 03/29/17

Hospital Reimbursement Services, Inc., agents for Franciscan Health Munster, for and in consideration of payment and/or benefits totaling \$909.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Oscar Aragon that now exists against all parties, including Founders Insurance, as a result of Oscar Aragon's treatment, account number(s): 217066324 treatment date(s) 03/07/2017, arising out of an accident which occurred on or about 03/06/2017.

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

File No.: 17-184622

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