

2019 035200

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2019 JUN 12 AM 9:32

MICHAEL B. BROWN  
RECORDED

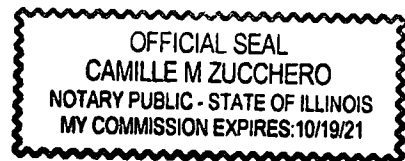
RELEASE OF RECORDED LIEN 2019 012160 DATED 02/27/19

Hospital Reimbursement Services, Inc., agents for Franciscan Health Crown Point, for and in consideration of payment and/or benefits totaling \$3,500.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Linde A Kemp that now exists against all parties, including Indiana Farm Bureau and State Farm, as a result of **Linde A Kemp's** treatment, account number: 618233521 treatment date: 01/03/2019, arising out of an accident which occurred on or about 12/09/2017.

I have read the above Release and I hereunto set my hand and seal this 3<sup>rd</sup> day of June, 2019.

Franciscan Health Crown Point

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



STATE OF ILLINOIS )  
  )SS  
COUNTY OF LAKE )

On this 3<sup>rd</sup> day of June, 2019, before me personally came Neil J. Greene, As Agent for Franciscan Health Crown Point, 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 Zuccherro

Lake County  
File No.: 19-231503

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