

2019 063096

2019 SEP 18 AM 9:18

MICHAEL B. BROWN  
RECORDER

**RELEASE OF RECORDED LIEN 2018 085504 DATED 12/12/18**

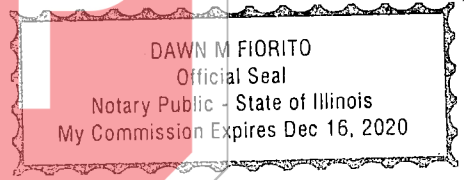
Hospital Reimbursement Services, Inc., agents for Franciscan Health Crown Point, for and in consideration of payment and/or benefits totaling \$615.82, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of John M Quill that now exists against all parties, including American Family Insurance, as a result of **John M Quill's** treatment, account number(s): 618170832 treatment date(s) 09/15/2018, arising out of an accident which occurred on or about 09/09/2018.

I have read the above Release and I hereunto set my hand and seal this 11<sup>th</sup> day of

September ~~2018~~ **This Document is the property of the Lake County Recorder!**

Franciscan Health Crown Point

BY: Camille Zucchero  
Camille Zucchero, Client Manager  
Hospital Reimbursement Services, Inc.  
As Agent



STATE OF ILLINOIS )  
)SS  
COUNTY OF LAKE )



On this 11<sup>th</sup> day of September, 2019, before me personally came Camille Zucchero, 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.

Dawn M Fiorito

Lake County  
File No.: 18-226442

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