

2019-081737

2019 Nov 27 8:45 AM

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
MICHAEL B BROWN
RECORDER

RELEASE OF RECORDED LIEN 2019 010622 DATED 02/21/19

Hospital Reimbursement Services, Inc., agents for Franciscan Health Crown Point, for and in consideration of payment and/or benefits totaling \$8,824.20, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Mark Ruben that now exists against all parties, including Kemper Insurance and The Hartford Insurance, as a result of **Mark Ruben's** treatment, account number: 618233466 treatment date: 12/19/2018, arising out of an accident which occurred on or about 07/14/2017.

I have read the above Release and I hereunto set my hand and seal this 20th day of

November

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Franciscan Health Crown Point

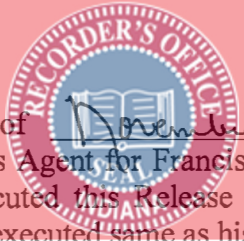
BY:

Neil J. Greene

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



STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)



On this 20th day of November, 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. Zucchero

Lake County
File No.: 19-230837

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