

GINA PIMENTEL  
RECORDER  
STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2021-071002

8:44 AM 2021 Dec 9

**RELEASE OF RECORDED LIEN 2019 014652 DATED 03/13/19**

Hospital Reimbursement Services, Inc., agents for Franciscan Health Hammond, for and in consideration of payment and/or benefits totaling \$2,430.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Samantha Robinson that now exists against all parties, including USAA Insurance, as a result of **Samantha Robinson's** treatment, account number(s): 219054734 treatment date(s) 02/15/2019, arising out of an accident which occurred on or about 02/15/2019.

I have read the above Release and I hereunto set my hand and seal this 3rd day of

December, 2021.

Franciscan Health Hammond

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

STATE OF ILLINOIS )  
                          )SS  
COUNTY OF LAKE )

On this 3rd day of December 2021, before me personally came Camille Zucchero, As Agent, for Franciscan Health Hammond, known to me to be the individuals 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.: 19-234851



Property of Lake County Recorder

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Cl# 070028  
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