

GINA PIMENTEL
RECORDER
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2021-071004

8:44 AM 2021 Dec 9

RELEASE OF RECORDED LIEN 2012 025976 DATED 04/19/12

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$1,960.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of John Clements that now exists against all parties as a result of **John Clements's** treatment, account number(s): 9211206816 treatment date(s) 12/18/2011, arising out of an accident which occurred on or about 12/14/2011.

I have read the above Release and I hereunto set my hand and seal this 3rd day of December, 2021.

St. Margaret - Hammond

BY: [Signature]
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 St. Margaret - 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.

[Signature]



Lake County
File No.: 12-26391

Property of [Watermark]

Recorder

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