

NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL
RECORDER
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2022-012775

8:50 AM 2022 Apr 12

RELEASE OF RECORDED LIEN 2019 031677 DATED 05/29/19
RELEASE OF AMENDMENT TO RECORDED LIEN 2019-080030 DATED 11/20/19

Hospital Reimbursement Services, Inc., agents for Franciscan Health Munster, for and in consideration of payment and/or benefits totaling \$5,180.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Timothy Lee that now exists against all parties, including State Farm, as a result of Timothy Lee's treatment, account number(s): 219071978/219360522 treatment date(s) 03/14/2019;11/06/2019, arising out of an accident which occurred on or about 03/01/2019.

I have read the above Release and I hereunto set my hand and seal this 7th day of April 2022.

Franciscan Health Munster

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

STATE OF ILLINOIS)
)SS
COUNTY OF LAKE

On this 7th day of April, 2022, before me personally came Neil J. Greene, As Agent, for Franciscan Health Munster, 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
OFFICIAL SEAL
DAWN M FIORITO
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES: 12/16/24

Lake County
File No.: 19-240417/19-253152

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