## NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY FILED FOR RECORD 2022-012776

8:50 AM 2022 Apr 12

RELEASE OF RECORDED LIEN 2021-048486 DATED 07/22/21

Hospital Reimbursement Services, Inc., agents for Franciscan Health Crown Point, for and in consideration of payment and/or benefits totaling \$3,946.40 and an additional payment and/or benefits totaling \$996.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Adam Howe as Parent/Guardian of Hailee C Howe that now exists against all parties, including Progressive Insurance, as a result of Hailee C Howe's treatment, account number: 620321754 treatment date: 06/15/2021, arising out of an accident which occurred on or about 06/15/2021.

occurred on as about as 15,222.
I have read the above Release and I hereunto set my hand and seal this day of
Apr:1 2022
Franciscan Health Crown Point
BY: Neil J. Creene, As Agent
Hospital Reimbursement Services, Inc.
STATE OF ILLINOIS ) SS
COUNTY OF LAKE )  On this 4th day of Anni 2022, before n
personally came Neil I Greene, As Agenty for Franciscan Health Crown Point, known to me to
the individuals who executed this Release and acknowledge that he she fully understands
contents and freely executed same as his/her free and voluntary act.
Thun Minux
Lake County File No.: 21-280591  OFFICIAL SEAL DAWN M FIGRITO NOTARY FIREM: STATE OF ILLINOIS MY COMMISSION EXPIRES: 17/16/24

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