

# NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL  
RECORDER  
STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2022-012783

8:50 AM 2022 Apr 12

RELEASE OF RECORDED LIEN 2015043546 DATED 07/15/15

Hospital Reimbursement Services, Inc., agents for St. Margaret - Hammond, for and in consideration of payment and/or benefits totaling \$808.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Carina C Hughes that now exists against all parties, including State Farm Insurance, as a result of Carina C Hughes's treatment, account number(s): 215148896 treatment date(s) 06/12/2015, arising out of an accident which occurred on or about 06/12/2015.

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

St. Margaret - Hammond

BY: Dawn Fiorito  
Dawn Fiorito, As Agent  
Hospital Reimbursement Services, Inc.

STATE OF ILLINOIS )  
                                  )SS  
COUNTY OF LAKE )

On this 7th day of April, 2022, before me personally came Dawn Fiorito, 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.

Camille M. Zuccherro

Lake County  
File No.: 15-124733



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