

NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL
RECORDER
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2022-020336

8:30 AM 2022 Jun 28

RELEASE OF RECORDED LIEN 2019 023518 DATED 04/24/19

Hospital Reimbursement Services, Inc., agents for Franciscan Health Crown Point, for and in consideration of payment and/or benefits totaling \$7,000.00, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Clarence Bauswell that now exists against all parties, including Travelers Insurance, as a result of Clarence Bauswell's treatment, account number(s): 619059415 treatment date(s): 04/02/2019, arising out of an accident which occurred on or about 02/20/2019.

I have read the above Release and I hereunto set my hand and seal this 21st day of

June 2022

Franciscan Health Crown Point

BY:

Dawn Fiorito

Dawn Fiorito, As Agent
Hospital Reimbursement Services, Inc.

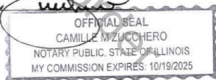
Hospital Reimbursement Services, Inc., 250 Parkway Dr., Suite 168, Lincolnshire, IL 60069
Telephone 847-403-5870 | Facsimile 847-403-5871 | File No.: 19-237910

STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)

On this 21st day of June, 2022, before me personally came Dawn Fiorito, As Agent; for Franciscan Health Crown Point, 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.

Lake County

Camille M. Zuccherro



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CK
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