

NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL
RECORDER
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2023-009141

9:37 AM 2023 Mar 24

RELEASE OF RECORDED LIEN 2022-041557 DATED 12/19/22

Hospital Reimbursement Services, Inc., agents for Franciscan Health Crown Point, for and in consideration of payment and/or benefits totaling \$4,360.61, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Tucker Ellis that now exists against all parties as a result of Tucker Ellis's treatment, account number(s): 620658378 treatment date(s): 10/12/2022, arising out of an accident which occurred on or about 10/12/2022.

I have read the above Release and I hereunto set my hand and seal this 13th day of

March, 2023

Franciscan Health Crown Point

BY: Neil J. Greene
Neil J. Greene, 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.: 22-378425

STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)

On this 13th day of March, 2023, before me personally came Neil J. Greene, 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
OFFICIAL SEAL
CAMILLE M ZUCCHERO
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 10/19/2025

25 -
279250

E AM