

NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL
RECORDER
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2023-009142

9:37 AM 2023 Mar 24

RELEASE OF RECORDED LIEN 2023-006120 DATED 02/24/23

Hospital Reimbursement Services, Inc., agents for Franciscan Health Crown Point, for and in consideration of payment and/or benefits totaling \$1,300.85, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Shannon R Miller that now exists against all parties, including Cottingham and Butler Claim Services, as a result of Shannon R Miller's treatment, account number(s): 620688208/620694687 treatment date(s): 11/22/2022-11/23/2022; 12/22/2022, arising out of an accident which occurred on or about 11/22/2022.

I have read the above Release and I hereunto set my hand and seal this 16th 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.: 23-381691/23-382078

STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)

On this 16th 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



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