

NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL
RECORDER
STATE OF INDIANA
LAKE COUNTY
RECORDED AS PRESENTED
2023-029904
8:41 AM 2023 Nov 6

RELEASE OF RECORDED LIEN 2023-025949 DATED 09/08/23

Hospital Reimbursement Services, Inc., agents for Franciscan Health Dyer, for and in consideration of payment and/or benefits totaling \$2,870.75, the receipt of which is hereby acknowledged, does release and discharge the Hospital Lien of Carrington Thomas that now exists against all parties, as a result of Carrington Thomas's treatment, account number: 221264578 treatment date: 07/26/2023, arising out of an accident which occurred on or about 07/26/2023.

I have read the above Release and I hereunto set my hand and seal this 23rd day of

October, 2023

Franciscan Health Dyer

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.: 23-390881



STATE OF ILLINOIS)
)SS
COUNTY OF LAKE)

On this 23rd day of October, 2023, before me personally came Neil J. Greene, As Agent; for Franciscan Health Dyer, 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. Zucchero



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