

GENERAL RELEASE IN FULL
Claim Number CES8444

KNOW ALL MEN BY THESE PRESENTS, that I, **Marcus Slattery**, for the sole consideration of **exactly Sixty Thousand Dollars (\$60,000)** to me in hand paid by **Travelers Indemnity Company of Connecticut** hereinafter "**TRAVELERS**," **for and on behalf of Town of Pennsauken**, have released and discharged, and by these presents do for myself, my heirs, executors, administrators and assigns, release and forever discharge **Town of Pennsauken** and **TRAVELERS**, their heirs, agents, employees, representatives, parent companies, affiliates, subsidiaries, successors, assigns and all other persons, firms or corporations from any and all liability, claims, demands, damages, actions, or causes of action, joinders, costs, contribution, demands whatsoever, in law or in equity, on account of damage to property, bodily injuries or death, resulting, or to result, from an incident/accident that occurred on or about the **March 17, 2011 at or near 3347 Haddonfield Road, Pennsauken, New Jersey**, and of and for all claims or demands whatsoever in law or in equity, which my heirs, executors, administrators or assigns can, shall or may have by reason of any matter, cause or thing whatsoever prior to the date hereof.

IT IS UNDERSTOOD AND AGREED THAT this is a full and final release of all claims of every nature and kind whatsoever, and releases claims against the Releasees that are known and unknown, suspected and unsuspected.

IT IS FURTHER UNDERSTOOD AND AGREED that the acceptance of this sum is a full accord and satisfaction of a disputed claim and the payment of this sum is not to be construed as an admission of liability and liability is hereby expressly denied.

IT IS FURTHER UNDERSTOOD AND AGREED that in consideration of the payment of the aforementioned sum, the undersigned hereby agrees to satisfy all liens and subrogation interests, including, but not limited to the charges of any health care provider, any lien or subrogation interest of any health care insurer and/or any worker's compensation insurer and/or Medicare and/or Medicaid, including any conditional payments made or which may have been made by Medicare or Medicaid, or any other person or entity claiming any liens or charges against the undersigned. The undersigned further agree(s) to defend, indemnify, save and hold harmless **Town of Pennsauken** and **TRAVELERS**, their heirs, executors, administrators, successors, assigns, insurers, and all other persons, firms and corporations, whether herein named or referred to or not, against any loss from any and all further claims and demands made against them on account of the injuries and damages sustained in consequence of the aforesaid accident. In the event that Medicare may have any interest in this settlement, the undersigned further agrees that all necessary information will be submitted to the Medicare Secondary Payer Recovery Contractor concerning the terms and conditions of this settlement.

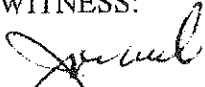
IT IS FURTHER UNDERSTOOD AND AGREED that the undersigned warrants that he/she/they does not have any outstanding arrearages or liens for child support against him/her/them.

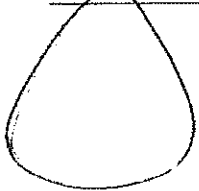
IT IS FURTHER UNDERSTOOD AND AGREED that the undersigned will have the docket at No. L-743-12 in the Superior Court of New Jersey, Camden County Law Division marked settled and discontinued or Dismissed. It is understood that no court costs will be reimbursed to the undersigned or their attorney.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 26

day of April, 2012.

WITNESS:







Plaintiff, Marcus Slattery