such Officer and with full authority) executed the same voluntarily

19 88

Given under my hand and official seal this the

My Commission Expires:

(for and as the act of said Corporation).

January

This instrument was prepared

by Donald J. Sides

2222 Arlington Avenue South

Birmingham, Alabama 35255

day of

for

acknowledges

*2*37

Attorney

KNOW ALL MEN BY

Sides,

FULL SATISFACTION OF RECORDED LIEN

THESE PRESENTS, That the undersigned,

Shelby County Hospital Board dba

payment

of

the

4th

full

STATE OF ALABAMA

JEFFERSON COUNTY

J.

Shelby Medical Center

Donald