20080221000070840 1/1 \$11.00 Shelby Cnty Judge of Probate, AL 02/21/2008 11:35:04AM FILED/CERT

RELEASE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

LNB Ste 450, 619 19th ST. S., Birmingham, AL 35249-6510 1-888-309-8435 or 934-6405

In consideration of the payment of the debt therein named, I do hereby release hospital lien against <u>Francis Eastis</u> patient, et al., to University of Alabama Hospital, dated <u>02/13/2007</u> and which is recorded in Document # <u>20070213000067840</u> of the records of Probate Judge, Shelby County, State of Alabama.

Account No.: 064330524.7535 Amount Releasing: \$19,074.98

Witness my hand this_

day of thrung 2008.

University of Alabama Hospital

Duly Authorized Representative, UAB/PFS

My Commission Expires 11-22

Notary Public

NOTARY PUBLIC STATE OF ALABAMA AT LARGE MY COMMISSION EXPIRES: Jan 22, 2012 NONDED THRU NOTARY PUBLIC UNDERWRITERS

Lien Release Prepared by: Kelli Hill LNB 450, 619 19th Street South Birmingham, Alabama 35249-6510