

D048378467


TO: Shelby County Probate Office
P.O Box 825
Columbiana, AL 35051

20090813000312430 1/1 \$11.00
Shelby Cnty Judge of Probate, AL
08/13/2009 02:36:03 PM FILED/CERT

RELEASE OF HOSPITAL LIEN

On **May 11, 2009**, DCH Health System, whose address is 809 University Boulevard E, Tuscaloosa, Alabama 35401-2029, caused to be recorded in the office of the Probate Judge of Shelby County, Alabama, in **INSTURMENT NUMBER 20090511000177320** a lien upon and against all rights of action, suits, claims, counterclaims or demands, etc. of patient **Paneshia Moore**, for the customary charges for care and treatment or transportation of patient **Paneshia Moore**, on account of injuries giving rise to such claims and which necessitated such services, for furnishing treatment, care and maintenance to said injured person. The lien is hereby released by DCH Health System who is the owner of the debt, obligation and lien.

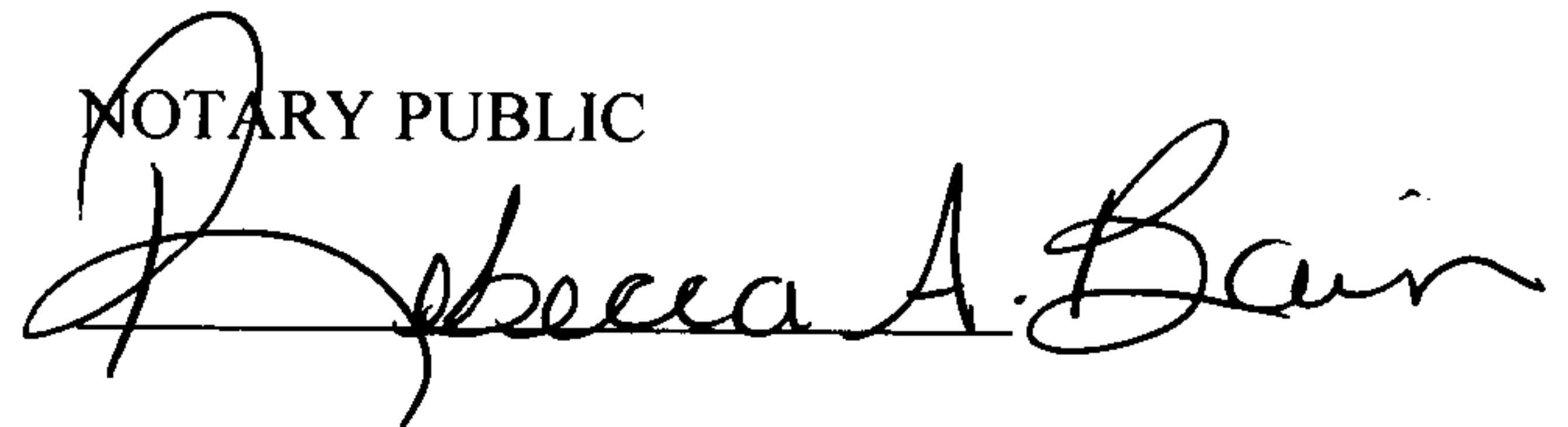
Therefore, in consideration of the foregoing, the undersigned, Tim B. Smith, Authorized agent for DCH Health System, authorizes and directs the Tuscaloosa County Probate Court Clerk, to discharge the same of record.

BY: 
Tim B. Smith, Authorized Agent

STATE OF MISSISSIPPI
COUNTY OF ALCORN

The foregoing statement was acknowledged and verified before me this 10th day of Aug., 2009, by Tim B. Smith the duly authorized agent/operator of the above health care provider for and on behalf of said hospital.

NOTARY PUBLIC



MY COMMISSION EXPIRES:

