Shelby County Probate Office TO:

P.O. Box 825

Columbiana, AL 35051

RELEASE OF HOSPITAL LIEN

On 10/17/2014, Baptist Health System, Inc., whose address is 1000 1st Street North Alabaster, AL 35007, caused to be recorded in the office of the Probate Judge of Shelby County Probate Office, Alabama, in Instrument No. 20141017000329650, a lien upon and against all rights of action, suits, claims, counterclaims or demands, etc. of patient, Craig Roberson, for the customary charges for care and treatment or transportation of patient Craig Roberson, 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 Shelby Baptist Medical Center who is the owner of the debt, obligation and lien.

2.	Therefore, in considerat	tion of the foregoing, the	he undersigned,	Kimberlee M.
Fair, authorized agen	t for Shelby Baptist Med	ical Center, authorizes	s and directs the	Shelby County
Probate Office Court	Clerk, to discharge the s	ame of record.		
			1 - 1/	

BY:

STATE OF MISSISSIPPI COUNTY OF ALCORN

Shelby Baptist Medical Center

Kimberlee M. Fair

The foregoing statement was acknowledged and verified before me this Friday, May 29, 2015, by Kimberlee M. Fair the duly authorized agent of the above named health care provider for and on

behalf of said hospital.

MY COMMISSIC AMY E. LAMBERT

NOTARY PUBLIC

20150603000184020 1/1 \$14.00 Shelby Cnty Judge of Probate, AL 06/03/2015 12:46:10 PM FILED/CERT

Kimberlee M. Fair P.O Box 1465 Corinth, MS 38834