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 Shelby Cnty Judge of Probate, AL  
 12/07/2020 02:21:56 PM FILED/CERT

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

**AUTHORITY TO RELEASE AND DISCHARGE HOSPITAL LIEN**

You are hereby authorized and requested to release and discharge that certain Notice of Hospital Lien against claims of Heather Dean, which Baptist Health System, Inc. caused to be recorded on 12/11/2019 as 20191211000457670 in the probate office of Shelby County Probate Office, in Alabama.

By:

*Courtney B. Smith*

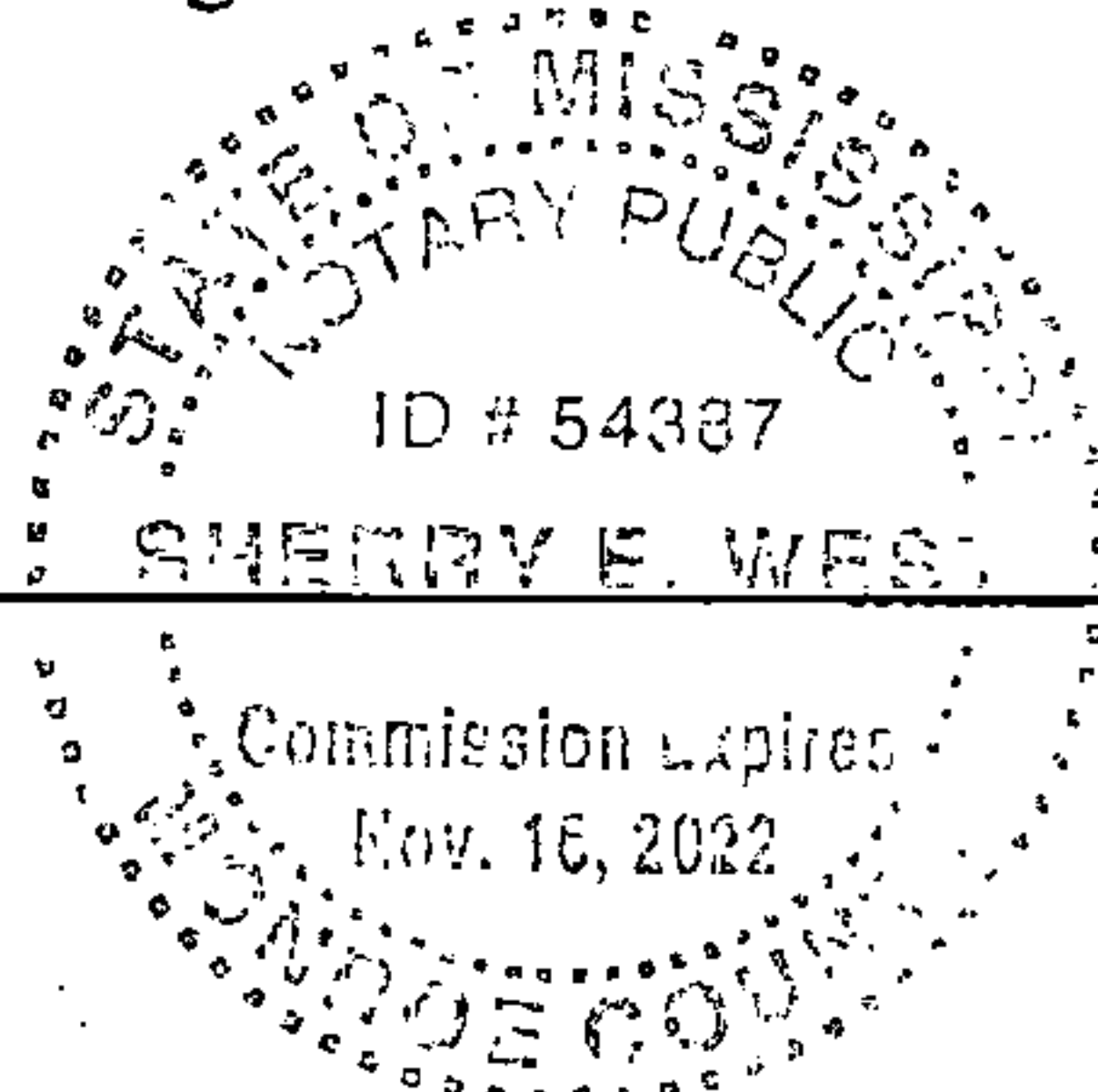
Courtney B. Smith, Esq. (2987N58S)  
 Authorized Agent for Shelby Baptist Medical Center  
**FOR INQUIRIES CALL (855) 283-2887**

State of Mississippi A

County of Lowndes E

The foregoing statement was acknowledged and verified before me this Monday, November 23, 2020, by Courtney B. Smith, Esq., the duly authorized agent of the above named health care provider for and on behalf of said hospital.

My commission expires:



*Sherry E. West*  
 NOTARY PUBLIC

Prepared by:  
 Courtney B. Smith, Esq.  
 514 East Waldron Street  
 Corinth, MS 38834