	eraja proporti de la compositión de la Compositión
	TATE OF ALABAMA) ### FULL SATISFACTION OF RECORDED LIEN ###################################
	KNOW ALL MEN BY THESE PRESENTS, That the undersigned,
D	onald J. Sides, Attorney for Shelby County Hospital Board dba
She	lby Medical Center acknowledges full payment of the
i She She	ndebtedness secured by that certain judgment in the case of alby County Hospital Board dba elby Medical Center vs. P.W. Fowler SM-86-1802 , which said
į	udgment was recorded in the Office of the Judge of Probate of
_	Shelby County, Alabama, in Book No. 107, Page
N	lo, (and assigned to in Book
N	o, Page No), and the undersigned does further
	nereby release and satisfy said judgment.
	IN WITNESS WHEREOF, the undersigned, Donald J. Sides,
_	nas caused these presents to be executed this the 15th day of February , 19 88 .
PAGE 619	STATE OF ALA. SHELBY LL. I CERTIFY THIS INSTRUMENT WAS FILED By: By: By: By:
. ₹	Donald J. Sides
<u>`</u>	For Satisfactions of Judgments Only STATE OF ALABAMA OF PROBATE JEFFERSON COUNTY
8	JEFFERSON COUNTY)
:	I, the undersigned authority, in and for said County in said State, certify that Donald J. Sides, whose name as Attorney of Shelby County Hospital Board dba Shelby Medical Center, a corporation, is signed to the foregoing instrument, acknowledged before me on this day that, being informed of the contents of the instrument, he (as such Officer and with full authority) executed the same voluntarily (for and as the act of said Corporation).
	Given under my hand and official seal this the $\frac{15 \mathrm{th}}{25 \mathrm{th}}$
	This instrument was prepared Notary Public My Commission Expires: 1-31-89

by Donald J. Sides

2222 Arlington Avenue South

Birmingham, Alabama 35255