STATE OF ALABAMA)
JEFFERSON COUNTY)

3876 **FULL SATISFACTION OF RECORDED LIEN**

KNOW ALL MEN BY THESE PRESENTS, That the undersigned, Donald J. Sides, Attorney for SHELBY COUNTY HOSPITAL BOARD DBA SHELBY MEDICAL CENTER acknowledges full payment of the indebtedness secured by that certain judgment in the case of SHELBY COUNTY HOSPITAL BOARD DBA SHELBY MEDICAL CENTER VS. PATRICIA WYATT, which said judgment was recorded in the Office of the Judge of Probate of SHELBY County, Alabama, in Book No. 086, Page No. 224, (and assigned to _____ in Book No. _____, Page No. _____), and the undersigned does further hereby release and satisfy said judgment.

BOOK 262 PAGE 177

IN WITNESS WHEREOF, the undersigned, Donald J. Sides, has caused these presents to be executed this the 16th day of OCTOBER, 19 89.

1. Deed Tax	$ _____
2. Mtg. Tax	$ _____
3. Recording Fee	$ 2.50
4. Indexing Fee	$ 3.00
5. No Tax Fee	$ _____
6. Certified Stamp Fee	$ 1.00
Total	$ 6.50

SIROTE, PERMUTT, MCDERMOTT, SLEPIAN, FRIEND, FRIEDMAN, HELD & APOLINSKY, P.C.

By: Donald J. Sides
Donald J. Sides
For Satisfactions Of Judgments Only

STATE OF ALA. SHELBY CO.
I CERTIFY THIS
INSTRUMENT WAS FILED

89 OCT 18 PM 12:04

STATE OF ALABAMA)
JEFFERSON COUNTY)

I, the undersigned authority, in and for said County in said State, certify that Donald J. Sides, whose name as Attorney of SHEBY COUNTY HOSPITAL BOARD DBA SHELBY MEDICAL CENTER 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 16th day of OCTOBER, 19 89.

Patricia M Jones
Notary Public
My Commission Expires: July 5, 1993

This instrument was prepared
by Donald J. Sides
2222 Arlington Avenue South
Birmingham, Alabama 35255