

STATE OF ALABAMA-
JEFFERSON COUNTY-

4690
FULL SATISFACTION OF RECORDED LIEN

KNOW ALL MEN BY THESE PRESENTS, THAT THE UNDERSIGNED,
DONALD J. SIDES, ATTORNEY FOR:

SHELBY COUNTY HEALTH CARE AUTHORITIES D/B/A SHELBY MEDICAL C
ACKNOWLEDGES FULL PAYMENT OF THE INDEBTEDNESS SECURED BY
THAT CERTAIN JUDGMENT IN THE CASE OF:

SHELBY COUNTY HEALTH CARE AUTHORITIES D/B/A SHELBY MEDICAL
CENTER VS ROBERT W MORRIS IN THE SMALL CLAIMS COURT OF
SHELBY COUNTY ALABAMA, SM8801468

WHICH SAID JUDGMENT WAS RECORDED IN THE OFFICE OF THE JUDGE
OF PROBATE OF SHELBY COUNTY, ALABAMA, IN BOOK NO. 238,
PAGE NO. 174, AND THE UNDERSIGNED DOES FURTHER HEREBY RELEASE
AND SATISFY SAID JUDGMENT.

IN WITNESS WHEREOF, THE UNDERSIGNED, HAS CAUSED THESE
PRESENTS TO BE EXECUTED THIS THE 20TH DAY OF OCTOBER, 1989.
SIROTE, PERMUTT, FRIEND, FRIEDMAN,
HELD & APOLINSKY, P.C.

BY:

BY: 

STATE OF ALABAMA-
JEFFERSON COUNTY-

FOR SATISFACTIONS OF JUDGEMENTS ONLY

I, THE UNDERSIGNED AUTHORITY, IN AND FOR SAID COUNTY,
IN SAID STATE, CERTIFY THAT DONALD J. SIDES, WHOSE NAME AS
ATTORNEY OF SHELBY COUNTY HEALTH CARE AUTHORITIES D/B/A SHELBY MEDI
IS SIGNED TO THE FOREGOING INSTRUMENT, ACKNOWLEDGED BEFORE ME ON
THIS DAY THAT, BEING INFORMED OF THE CONTENTS OF THE INSTRUMENT,
HE, AS SUCH ATTORNEY AND WITH FULL AUTHORITY, EXECUTED THE SAME
VOLUNTARILY FOR AND AS THE ACT OF SAID PLAINTIFF.

GIVEN UNDER MY HAND AND OFFICIAL SEAL THIS THE 20TH DAY OF
OCTOBER, 1989.

NOTARY PUBLIC: 

MY COMMISSION EXPIRES: MY COMMISSION EXPIRES JULY 5, 1993

THIS INSTRUMENT WAS PREPARED BY:

DONALD J. SIDES
SIROTE, PERMUTT, FRIEND, FRIEDMAN,
HELD AND APOLINSKY, P.C.
2222 ARLINGTON AVENUE SOUTH
BIRMINGHAM, ALABAMA 35255

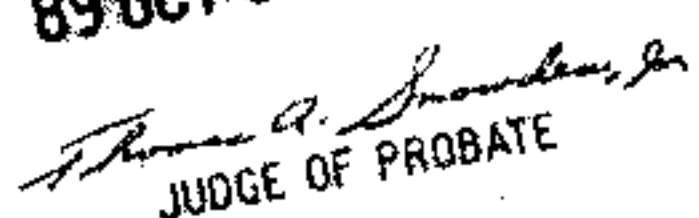
DEBTOR # 8446965

LOCATOR # 657-2-514

COURT # 644

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

89 OCT 31 AM 8:56


JUDGE OF PROBATE