

STATE OF ALABAMA-

FULL SATISFACTION OF RECORDED LIEN

JEFFERSON COUNTY-

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 PAM CARROLL IN THE DISTRICT COURT OF SHELBY COUNTY  
ALABAMA CIVIL DIVISION, DV8900288

WHICH SAID JUDGMENT WAS RECORDED IN THE OFFICE OF THE JUDGE  
OF PROBATE OF SHELBY COUNTY, ALABAMA, IN BOOK NO. 250 ,  
PAGE NO. 833, 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 2ND DAY OF MARCH, 1990.

BY: SIROTE, PERMUTT, FRIEND, FRIEDMAN,  
HELD & APOLINSKY, P.C.

STATE OF ALABAMA-

JEFFERSON COUNTY-

BY: — *Donald J. Sides*

I, THE UNDERSIGNED AUTHORITY, INFORMATIONAL PURPOSES ONLY  
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 2ND DAY OF  
MARCH, 1990.

NOTARY PUBLIC: *Laticia M. Jones*

MY COMMISSION EXPIRES:

MY COMMISSION EXPIRES JULY 5, 1995

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 # 6180285

LOCATOR # 640-4-403

COURT # 644

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

90 MAR 13 PM 3:31

*James L. Jones*  
JUDGE OF PROBATE

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