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 REGINA D GOLDEN IN THE SMALL CLAIMS COURT OF SHELBY COUNTY ALABAMA . SM8801778

WHICH SAID JUDGMENT WAS RECORDED IN THE OFFICE OF THE JUDGE OF PROBATE OF SHELBY COUNTY, ALABAMA, IN BOOK NO. 236, PAGE NO. 21, 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.

8Y:

SIROYE, PERMUTT, FRIEND, FRIEDMAN, HELD & APOLINSKY, P.C.

STATE OF ALABAMA-

JEFFERSON COUNTY-

BY: _ Our Done

FOR SATISFACTIONS OF JUDGEMENTS COLD

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 DEFICIAL SEAL THIS THE 2ND DAY OF MARCH, 1990.

NOTARY PUBLIC

COMMISSION EXPIPER HWY . TOM

MY COMMISSION EXPIRES:

THIS INSTRUMENT WAS PREPARED BY:

DONALD J. SIDES SIROTE, PERMUTT, FR

STROTE, PERMUTT, FRIEND, FRIEDMAN, HELD AND APOLINSKY, P.C.

HELD AND APOLINSKY, P-C. 2222 ARLINGTON AVENUE SOUTH

BIRMINGHAM, ALABAMA 35255

DEBTOR # 8517666

LOCATOR # 656-1-608

COURT # 644

_

THE COMMISSION EXPIRES HAY 4, 1995

STATE OF ALA, SHELLIY CO. I CERTIFY THIS INSTRUMENT WAS FILED

90 MAR 13 PH 3: 31

JUDGE OF PROBATE