STATE OF ALABAMA)

JEFFERSON COUNTY)

FULL SATISFACTION OF RECORDED LIEN

KNOW ALL MEN BY THESE PRESENT, That the undersigned, Shelby County Health Care Authorities D/B/A/ Shelby Medical Center Attorney for _____ 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 V. Thomas Brent Hayes, DV91-0009 which said judgment was recorded in the Office of the Judge of Probate of Shelby County, Alabama, in Book No. 338, Page No. 488, (and assigned to _____ in Book No. _____ Page No. _____), and the undersigned does further hereby release and satisfy said judgment.

IN WITNESS WHEREOF, the undersigned, Attorney, has caused these present to be executed this the 9th day of July, 19 93.

SIROTE & PERMUTT, P.C.

BY: _____, Attorney

Inst # 1993-20133

STATE OF ALABAMA)

JEFFERSON COUNTY)

07/09/1993-20133
03:32 PM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
001 MCD 8.50

I, the undersigned authority, in and for the said county, in said State, certify that the above signed Attorney of Shelby County Health Care Authorities D/B/A/ Shelby Medical Center a corporation, is signed to the foregoing instrument, acknowledged before me on this day, 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 9th day of July 1993.

Kristi M. Ledlow
Notary Public

My commission expires: 11-21-95

THIS INSTRUMENT WAS PREPARED BY:

SIROTE & PERMUTT, P.C.
2222 Arlington Avenue South
Post Office Box 55727
Birmingham, Alabama 35255

No. 6 Monte Verde Dr
Montevallo, AL
35115

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