

STATE OF ALABAMA)

JEFFERSON COUNTY)

FULL SATISFACTION OF RECORDED LIEN

KNOW ALL MEN BY THESE PRESENTS. That the undersigned,
SHELBY COUNTY HEALTH CARE AUTHORITIES
GREGGORY M. DEITCH, Attorney for **D/B/A SHELBY MEDICAL CENTER**,

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 SHARON BURNS SM93-394, which

said judgment was recorded in the Office of the Judge of Probate of **SHELBY** County,

Alabama, in Book No. **1993**, Page No. **25196**, (and assigned to _____

in Book No. _____ Page No. _____), and the undersigned does further hereby release

said judgment.

IN WITNESS WHEREOF, the undersigned, **GREGGORY M. DEITSCH**,

has caused these presents to be executed this the **3rd** day of **DECEMBER**, 1994.

SIROTE & PERMUTT, P.C.

BY: 
GREGGORY M. DEITSCH

STATE OF ALABAMA)

JEFFERSON COUNTY)

I, the undersigned authority, in and for said County in said State, certify that
GREGGORY M. DEITSCH, whose name as Attorney of **SHELBY MEDICAL**
CENTER, a 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 **3rd** day of
December, 1994.


Notary Public

My Commission Expires: **1-3-97**

THIS INSTRUMENT WAS PREPARED BY:

Inst # **1995-05137**

SIROTE & PERMUTT, P.C.
2222 Arlington Avenue South
Birmingham, Alabama 35255

JW113638.JWW

02/27/1995-05137
02:58 PM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
001 MCD 8.50