

## SATISFACTION OF HOSPITAL LIEN

STATE OF ALABAMA: SHELBY COUNTY

INSTRUMENT # 20040708000376380 BOOK # PAGE #

KNOW ALL MEN BY THESE PRESENTS, THAT THE UNDERSIGNED, Stellavanna B Miller, LEGAL COORDINATOR AT BAPTIST HEALTH SYSTEM, INC. Shelby, ACKNOWLEDGES FULL PAYMENT OF THE INDEBTNESS SECURED BY THAT CERTAIN HOSPITAL LIEN AGAINST Lelia M Seay, IN THE AMOUNT OF \$9791.00 RECORDED IN THE OFFICES OF THE JUDGE OF PROBATE OF Shelby County, Alabaster, Alabama, AND THE UNDERSIGNED DOES FURTHER HEREBY RELEASE AND SATISFY SAID LIEN.

IN WITNESS WHEREOF, THE UNDERSIGNED Stellavanna B Miller HAS CAUSED THESE PRESENTS TO BE EXECUTED THIS  $14^{\mathrm{th}}$  DAY OF April,  $_{\bullet\bullet\bullet}$ 2005.

LEGAL COORDINATOR

STATE OF ALABAMA JEFFERSON COUNTY

## CORPORATE ACKNOWLEDGEMENT

THE UNDERSIGNED, A NOTARY PUBLIC IN AND FOR SAID COUNTY AND SAID STATE, HEREBY ACKNOWLEDGE THAT Stellavanna B Miller WHOSE NAME AS LEGAL COORDINATOR A DULY APPOINTED AGENT OF BAPTIST HEALTH SYSTEM, INC., A CORPORATION, IS SIGNED TO THE FOREGOING INSTRUMENT, AND WHO IS KNOWN TO ME, ACKNOWLEDGED BEFORE ME ON THIS DAY THAT, BEING INFORMED OF THE CONTENTS OF THE INSTRUMENT, SHE, AS SUCH AGENT AND WITH FULL AUTHORITY, EXECUTED THE SAME VOLUNTARILY FOR AND AS THE ACT OF SAID CORPORATION.

GIVEN UNDER MY HAND AND OFFICIAL SEAL THIS 14th DAY OF April, 2005.

Commission expires ALABAMA STATE AT LARGE MY COMMISSION EXPIRES

ACCT'S#: 54554712,54619648,54676150,54794631,54822580 & MARCH 6.72070