

RELEASE OF HOSPITAL LIEN

UNIVERSITY OF ALABAMA HOSPITAL

In consideration of the payment of the debt therein named, I do hereby release hospital lien against <u>DeAnna Holloway</u> patient, et al., to University of Alabama Hospital, dated <u>September 13, 2006</u> and which is recorded in Doc <u>20060913000453690</u> Lien, of the records of Probate Judge, Shelby County, State of Alabama.

Account No.: 064288385-6235 Amount Releasing: \$61,221.03

Witness my hand this_

day of Lecintic 2006.

University of Alabama Hospital

 $\mathbf{R}\mathbf{v}$

Duly Authorized Représentative, UAB/PFS

My Commission Expires 0/21-2008

Notary Public

NOTARY PUBLIC STATE OF ALABAMA AT LARGE MY COMMISSION EXPIRES: Jan 22, 2008 BONDED THRU NOTARY PUBLIC UNDERWRITERS

Lien Release Prepared by: Dorothy McCurdy LNB 450, 619 19th Street South Birmingham, Alabama 35249-6510