

**RELEASE OF HOSPITAL LIEN**  
**UNIVERSITY OF ALABAMA HOSPITAL**  
LNB Ste 450, 619 19<sup>th</sup> ST. S., Birmingham, AL 35249-6510  
1-888-309-8435 or 934-6405

In consideration of the payment of the debt therein named, I do hereby release hospital  
lien against Dana N Chambers patient, et al., to University of Alabama Hospital, dated  
February 20, 2008 and which is recorded in Document# 20080220000068940 the records  
of Probate Judge, Shelby County, State of Alabama.

Account No.: 000475584 8542  
Amount Releasing: \$5,585.08

Witness my hand this 10<sup>th</sup> day of October 2008.

University of Alabama Hospital

By: [Signature]

Duly Authorized Representative, UAB/PFS

My Commission Expires 01-22-2012

[Signature]  
Notary Public

NOTARY PUBLIC STATE OF ALABAMA AT LARGE  
MY COMMISSION EXPIRES: Jan 22, 2012  
BONDED THRU NOTARY PUBLIC UNDERWRITERS

Lien Release Prepared by: Nikisha Loftin  
LNB 450, 619 19<sup>th</sup> Street South  
Birmingham, AL 35249-6510