

THIS INSTRUMENT WAS PREPARED BY: HEALTH CREDIT UNION 1400 6<sup>TH</sup> AVENUE SOUTH BIRMINGHAM, ALABAMA 35233

Shelby Cnty Judge of Probate, AL 02/04/2015 10:49:33 AM FILED/CERT

## FULL SATISFACTION OF RECORDED LIEN

STATE OF ALABAMA COUNTY 0F <i>SHELBY</i>
KNOW ALL MEN BY THESE PRESENTS, That, the undersigned HEALTH CREDIT UNION, acknowledges full payment of the indebtedness secured by that certain Real Property mortgage executed by <u>BLEN GALLOWAY AND WIFE KATHY GALLOWAY</u> which said mortgage was recorded in the Office of the Judge of Probate of <u>SNELBY</u> County, Alabama, in <u>2004 1001000542540</u> at Page No. <u>1-6</u> , and the undersigned does further hereby release and satisfy said mortgage.
IN WITNESS WHEREOF, the undersigned HEALTH CREDIT UNION has caused these presents to be executed this, 20, 20
HEALTH CREDIT UNION
BY: Almers Sines AS: MANAGEP
STATE OF ALABAMA ) JEFFERSON COUNTY) CORPORATE ACKNOWLEDGMENT
I, the undersigned, Notary Public, in and for said County in said State, hereby certify that <u>hereby Control</u> of HEALTH CREDIT UNION, a State Chartered Credit Union, 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, (s)he, as such officer and with full authority, executed the same voluntarily for and as the act of said credit union.
Given under my hand and Official seal this <u>2 not</u> day of <u>Feb</u> ,
Connie Sur Unite
NOTARY PUBLIC
MY COMMISSION EXPIRES:

CONNIE SUE WHITE

Notary Public

State of Alabama

MY COMMISSION EXPIRES: NOV 5, 2016