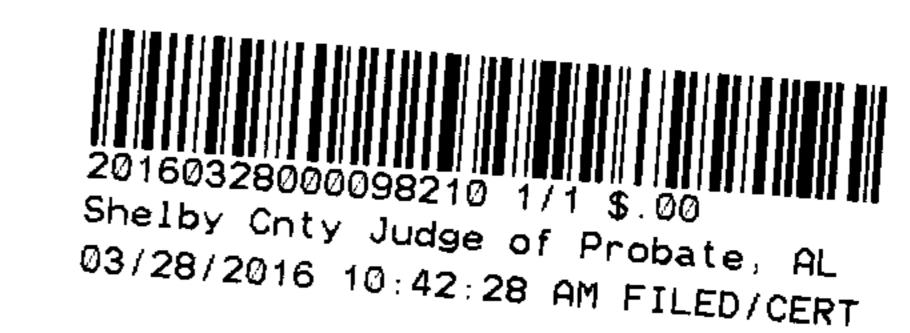
TO: Shelby County Probate Office P.O. Box 825

Columbiana, AL 35051



Kimberlee M. Fair

RELEASE OF HOSPITAL LIEN

1. On 1/14/2016, Baptist Health System, Inc., whose address is 1000 1st Street North Alabaster, AL 35007, caused to be recorded in the office of the Probate Judge of Shelby County Probate Office, Alabama, in Instrument No. 20160114000013650, a lien upon and against all rights of action, suits, claims, counterclaims or demands, etc. of patient, Alannah Watts, for the customary charges for care and treatment or transportation of patient Alannah Watts, on account of injuries giving rise to such claims and which necessitated such services, for furnishing treatment, care and maintenance to said injured person. The lien is hereby released by Shelby Baptist Medical Center who is the owner of the debt, obligation and lien.

· ·		oregoing, the undersigned, Kimberlee M.
Fair, authorized agent for Shelby Baptist	Medical Center	, authorizes and directs the Shelby County
Probate Office Court Clerk, to discharge	the same of reco	ord.
STATE OF MISSISSIPPI		Shelby Baptist Medical Center
	BY:	

2016, by Kimberlee M. Fair the duly authorized agent of the above named health care provider for

The foregoing statement was acknowledged and verified before me this Wednesday, March 23,

and on behalf of said hospital.

COUNTY OF ALCORN

MY COMMISSION EXPIRES?

Commission Expires:

Kimberlee M. Fair P.O Box 1465 Corinth, MS 38834

NOTARY PUBLIC