

**STATE OF ALABAMA
COUNTY OF SHELBY**

20180108000008170 1/1 \$.00
Shelby Cnty Judge of Probate, AL
01/08/2018 03:31:01 PM FILED/CERT

RELEASE OF RECORDED HOSPITAL LIEN

HEALTHCARE AUTHORITY FOR MEDICAL WEST, does hereby release that certain lien securing its reasonable charges for medical care provided to **Michael R Howard** as recorded at Instrument # **20171128000426110** in the Office of the Probate Court of the above county, as to all actions, claims, counterclaims, and demands accruing to the above person or accruing to the legal representatives of such person on account of the accident that necessitated said treatment, and upon all judgments, settlements, and settlement agreements entered into on account of injuries giving rise to such actions, claims, counterclaims, demands, judgments, settlements, or settlement agreements.

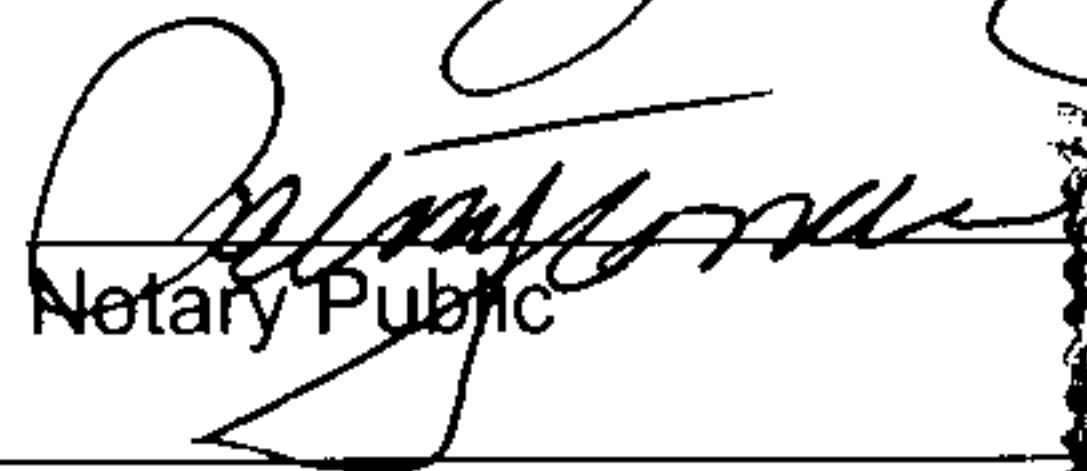
Dated this 2 January 2018.

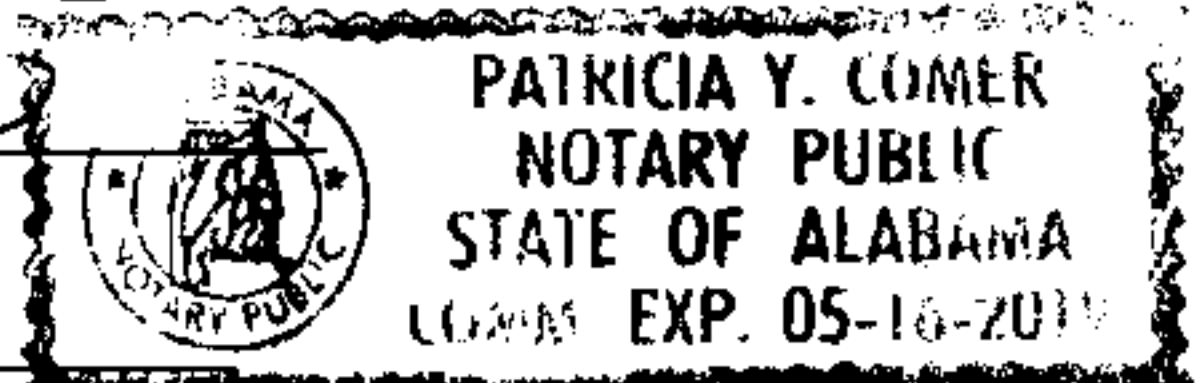
**HEALTHCARE AUTHORITY FOR MEDICAL
WEST, AN AFFILIATE OF UAB HEALTH
SYSTEM**

By: 

Before me the undersigned Notary Public, personally appeared, William Kent Upshaw, who being known to me did upon oath state that they did execute the above RELEASE OF RECORDED LIEN FOR HOSPITAL CHARGES, with full authority and knowledge of its contents as and for the entity identified above as HEALTHCARE AUTHORITY FOR MEDICAL WEST, AN AFFILIATE OF UAB HEALTH SYSTEM.

Subscribed and sworn to before me this 2 day of January, 2018


Notary Public



Instrument Prepared by Attorney William Kent Upshaw
Comer & Upshaw, LLP
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