## SATISFACTION OF HOSPITAL LIEN

STATE OF ALABAMA COUNTY SHELBY

STATE OF ALABAMA INST: 20110627000187040

KNOW ALL MEN BY THESE PRESENTS, THAT THE UNDERSIGNED RENEE
KORRECKT, ACKNOWLEDGES FULL PAYMENT OF THE INDEBTNESS SECURED BY
THAT CERTAIN HOSPITAL LIEN AGAINST DENISE BOYCE RECORDED IN THE
OFFICES OF THE JUDGE OF PROBATE OF SHELBY COUNTY, ALABAMA, IN
COLUMBIANA, ALABAMA, AND THE UNDERSIGNED DOES FURTHER HEREBY
RELEASE AND SATISFY SAID LIEN.

DATE OF ADMISSION - 5/25/11 AMOUNT - \$4,075.00

IN WITNESS WHEREOF, THE UNDERSIGNED RENEE KORRECKT, HAS CAUSED THESE PRESENTS TO BE EXECUTED THIS 3RD DAY OF MARCH, 2018.

BY:

Vendor Management Analyst

STATE OF ALABAMA COUNTY OF JEFFERSON

## CORPORATE ACKNOWLEDGEMENT

I, THE UNDERSIGNED, A NOTARY PUBLIC IN AND FOR SAID COUNTY AND SAID STATE, HEREBY ACKNOWLEDGE THAT RENEE KORRECKT WHOSE NAME AS VENDOR MANAGEMENT ANALYST A DULY APPOINTED AGENT OF BROOKWOOD BAPTIST HEALTH, A CORPORATION, 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, SHE, AS SUCH AGENT AND WITH FULL AUTHORITY, EXECUTED THE SAME VOLUNTARILY FOR AND AS THE ACT OF SAID CORPORATION.

GIVEN UNDER MY HAND AND SEAL THIS 3RD DAY OF MARCH, 2018.

NOTARY PUBLIC

EXPIRATION DATE

20180319000088610 1/1 \$.00 Shelby Coty Judge of Probate O

Shelby Cnty Judge of Probate, AL 03/19/2018 08:19:56 AM FILED/CERT