

TO: Shelby County Probate Office
P.O. Box 825
Columbiana, AL 35051

RELEASE OF HOSPITAL LIEN

1. On 3/17/2017, Health Care Authority of the City of Huntsville, whose address is 101 Sivley Road Huntsville, AL 35801, caused to be recorded in the office of the Probate Judge of Shelby County Probate Office, Alabama, Inst. # 20170317000090300, a lien upon and against all rights of action, suits, claims, counterclaims or demands, etc. of patient, Rebecca Smith, for the customary charges for care and treatment or transportation of patient Rebecca Smith, 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 Huntsville Hospital who is the owner of the debt, obligation and lien.

2. Therefore, in consideration of the foregoing, the undersigned, Amanda White, authorized agent for Huntsville Hospital, authorizes and directs the Shelby County Probate Office Court Clerk, to discharge the same of record.

STATE OF MISSISSIPPI
COUNTY OF ALCORN

BY: _____

Huntsville Hospital



Amanda White

The foregoing statement was acknowledged and verified before me this Wednesday, March 7, 2018, by Amanda White the duly authorized agent of the above named health care provider for and on behalf of said hospital.

MY COMMISSION EXPIRES:




NOTARY PUBLIC


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Shelby Cnty Judge of Probate, AL
03/19/2018 09:31:09 AM FILED/CERT