

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

## AUTHORITY TO RELEASE AND DISCHARGE HOSPITAL LIEN

You are hereby authorized and requested to release and discharge that certain Notice of Hospital Lien against claims of Quantina Johnson, which Baptist Health System, Inc. caused to be recorded on 2/7/2020 as instrument number 20200207000052440 in the probate office of Shelby County Probate Office, in Alabama.

By:

Courtney B. Smith, Esq. (2987N58S)

Authorized Agent for Shelby Baptist Medical Center

FOR INQUIRIES CALL (855) 283-2887

State of Mississippi County of Lowndes

The foregoing statement was acknowledged and verified before me this Monday, December 21, 2020, by Courtney B. Smith, Esq., the duly authorized agent of the above named health care provider for and on behalf of said hospital.

My commission expires:

116

2.8

ID # 54387

SHEARVE MEAR

Mimission Lupires Nov. 16. 2022 NOTARY PUBLIC

. Prepared by:

. Courtney B. Smith, Esq.

: 514 East Waldron Street

\* Corinth, MS 38834