SATISFACTION OF HOSPITAL LIEN

20220819000326510 1/1 \$22.00 Shelby Cnty Judge of Probate, AL 08/19/2022 11:27:25 AM FILED/CERT

STATE OF ALABAMA COUNTY OF SHELBY Instrument #2013081900038210

KNOW ALL MEN BY THESE PRESENTS, THAT THE UNDERSIGNED RENEE

KORRECKT, ACKNOWLEDGES FULL PAYMENT OF THE INDEBTNESS SECURED BY

THAT CERTAIN HOSPITAL LIEN AGAINST DALMOUS HALTIWAGNER 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 SERVICE 5/27/13 AMOUNT \$2967.00

IN WITNESS WHEREOF, THE UNDERSIGNED RENEE KORRECKT, HAS CAUSED THESE PRESENTS TO BE EXECUTED THIS 22ND OF JULY 2022.

BY: Renerkoneelt

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 BAPTIST HEALTH SYSTEM, 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 22nd DAY OF JULY 2022.

NOTARY PUBLIC

EXPIRATION DATE