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Shelby Cnty Judge of Probate, AL  
09/08/2025 12:57:38 PM FILED/CERT

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 Jennifer Castillo, which BBH SBMC caused to be recorded on 8/14/2025 as instrument number 20250814000248960 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 (833) 760-0817

State of Mississippi  
County of Lowndes

The foregoing statement was acknowledged and verified before me this Thursday, August 28, 2025, 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:

  
NOTARY PUBLIC