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 Shelby Cnty Judge of Probate, AL
 10/31/2025 01:38:42 PM FILED/CERT

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

AUTHORITY TO RELEASE AND DISCHARGE HOSPITAL LIEN

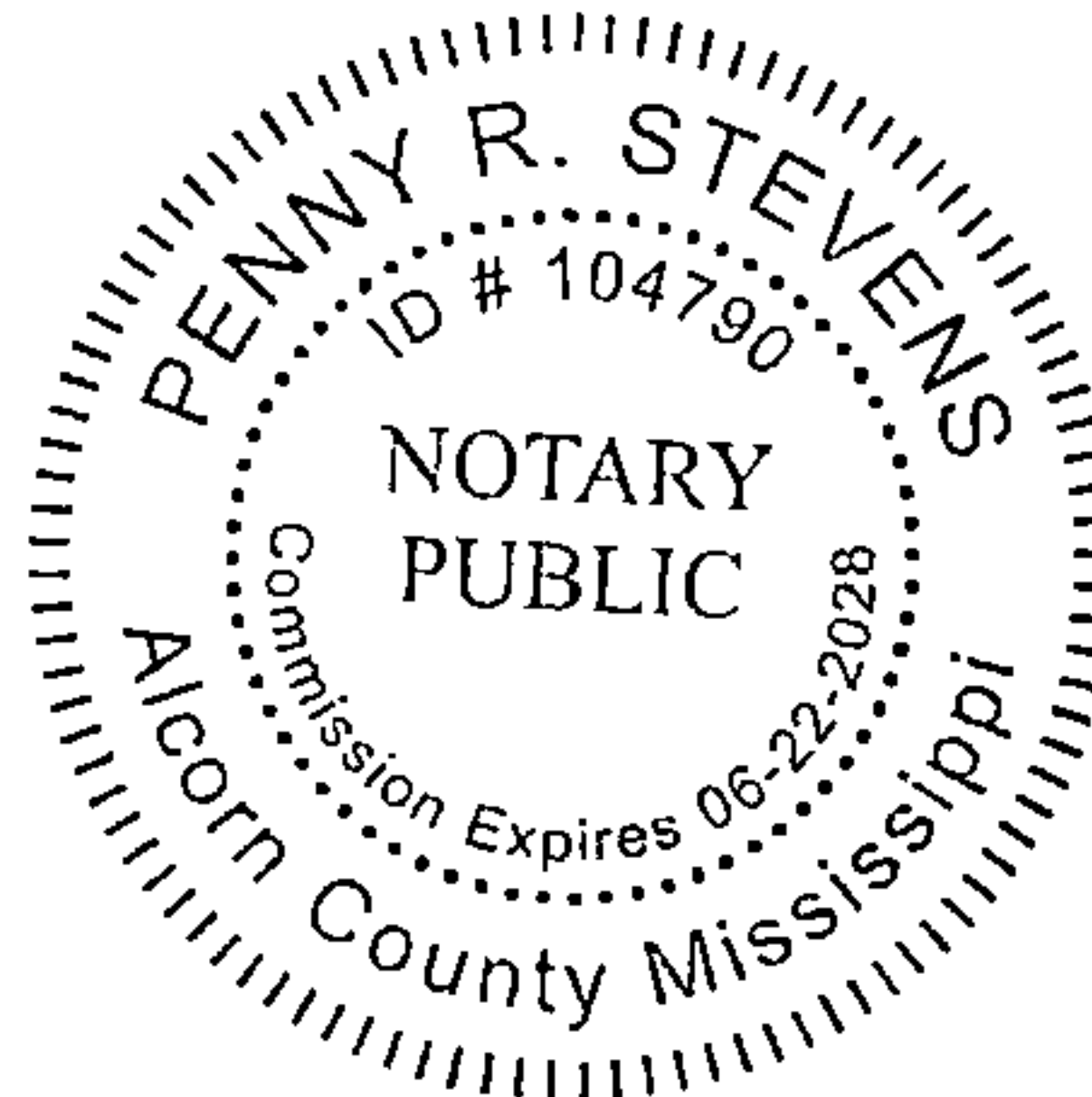
You are hereby authorized and requested to release and discharge that certain Notice of Hospital Lien against claims of Deidra Evans, which BBH SBMC caused to be recorded on 3/6/2023 as instrument number 20230306000061670 in the probate office of Shelby County Probate Office, in Alabama.

By: Courtney B. Smith
 Courtney B. Smith, Esq. (2987N58S)
 Authorized Agent for Shelby Baptist Medical Center
FOR INQUIRIES CALL (833) 760-0817

State of Mississippi
 County of ~~Lowndes~~ **ALCORN**

The foregoing statement was acknowledged and verified before me this Thursday, October 23, 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: 6-22-2028



Penny R. Stevens
 NOTARY PUBLIC

Prepared by:
 Courtney B. Smith, Esq.
 514 East Waldron Street
 Corinth, MS 38834