

STATE OF ALABAMA
6181382

HOSPITAL LIEN

NOTICE is hereby given, as provided by the laws of the state of Alabama, that the REGIONAL MEDICAL CENTER BOARD, d/b/a THE NORTHEAST ALABAMA REGIONAL MEDICAL CENTER, a public corporation, located at 400 East 10th Street, Anniston, Alabama, hereinafter referred to as "Hospital", claims a lien for reasonable charges for hospital care, treatment, maintenance necessitated from injuries to Timothy G. Ward

(Name of Patient)
who will hereinafter be called "Patient", whose address, as it appears on the records of said "Hospital" is 1436 Navajo Trail, Alabaster
(Street Number and Street) (City)

Shelby, Alabama, 35007, upon any and all
(County) (State) (Zip)

causes of action, suits, claims, counterclaims, and demands accruing to the said "Patient", and upon all judgements, settlements, and settlement agreements, entered into by virtue therefore on account of injuries given rise to such cause or action, suits, claims, counterclaims, demands, judgements, settlement agreements and maintenance.

- (a) The date of admission of said "Patient" to said "Hospital" is: 9-9-84
- (b) The date of discharge of said "Patient" from said "Hospital" is: 9-9-84
- (c) The account claimed to be due for said "Hospital's" care, treatment and maintenance is: Two Hundred Three Dollars and 00/100 Dollars (\$ 203.00).
- (d) The date said "Patient" received the injuries which necessitated said "Hospital's" care, treatment and maintenance: 9-9-84
- (e) The county in which said "Patient's" alleged cause of action arose: Shelby
- (f) The name and address of all persons, firms or corporations claimed by said "Patient", to be liable for damages arising from such injuries are, to the best of claimant's knowledge, as follows:

UNKNOWN	RECORDING FEES	UNKNOWN
(Name)	Recording Fee \$ <u>2.50</u>	(Full Address)
	Index Fee <u>1.00</u>	
(Name)	TOTAL \$ <u>3.50</u>	(Full Address)
(Name)		(Full Address)

STATE OF ALABAMA
INSTRUMENT
1984 SEP 17 PM 3:05
JUDGE OF PROBATE

THE REGIONAL MEDICAL CENTER BOARD d/b/a
THE NORTHEAST ALABAMA REGIONAL MEDICAL CENTER
a public corporation
BY: Janet Naugher

Before me, the undersigned, a Notary Public, in and for said county, in said State, personally appeared Janet Naugher and say: that She is the Business Office Manager of said "Hospital" and has personal knowledge of the fact set forth in the foregoing statement, and that the same are true and correct.

Janet Naugher
AFFIANT

Subscribed and sworn to before me on this 13 day of Aug 1984.

Calvin Smith
Notary Public, Calhoun County, AL
MY COMMISSION EXPIRES MAY 7, 1988

NORTHEAST ALABAMA
Regional Medical Center