

Lienholder: Baptist Health System, Inc. Patient: MARY E. GOODNITE Guarantor: MARY GOODNITE Lien Amount: \$7,509.00	STATEMENT OF HOSPITAL LIEN Ala. Code 35-11-37 (1975)
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NOTICE IS HEREBY GIVEN, that Baptist Medical Center - Montclair in Birmingham, Alabama claims a lien for its reasonable charges incurred in the care, treatment, and maintenance of the above patient. This lien is claimed upon any and all actions, claims, counterclaims, and demands accruing to this patient, or their legal representative, and upon all judgments, settlements, and settlement agreements entered into by virtue thereof on account of the injuries giving rise to such actions, claims, counterclaims, demands, judgments, settlements or settlement agreements, which necessitated such care, treatment or maintenance.

Date Injured: 01/21/99
 Acct# 12690954 \$6,999.00
 Date Admitted: 01/21/99
 Acct# 12753133 \$ 510.00
 Date Admitted: 01/28/99

Patients Address: _____
 269 Highway 39
 Chelsea, AL 35043

Claimant avers upon information and belief that the following persons, firms or corporations are or may be claimed by the patient to be liable for damages arising from his injuries:

Unknown at this time

*Under Alabama Code Section 35-11-37 (1975), the filing of this lien constitutes notice to any persons liable for such damages whether or not they are named herein.

Sandra L. Short
 Baptist Health System, Inc.

State of Alabama)
 Shelby County)

Personally appeared before me the undersigned Notary Public in and for said County and State, SANDRA L. SHORT who being known to me did execute the above Statement of Hospital Lien in my presence and furthermore having been first duly sworn did upon oath state that (s)he executed the same with full authority and as the act of Baptist Health System, Inc.

Done this 04th day of May, 1999.

Brenda Ann Rowe
 Notary Public

05/19/1999-21044
 10:42 AM CERTIFIED
 SHELBY COUNTY JUDGE OF PROBATE
 OUT 1999 9.30

Inst # 1999-21044