

## NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

LNB Ste 450, 619 19<sup>th</sup> ST. S., Birmingham, AL 35249-6510 1-888-309-8435 or 934-6405

## STATE OF ALABAMA SHELBY COUNTY

Notice is hereby given, as provided by the laws of the State of Alabama that UNIVERSITY OF ALABAMA HOSPITAL whose address is, LNB 450, 619 19<sup>th</sup> ST. S., Birmingham, AL 35249-6510, which operates a hospital of the same name, at the same address, claims a lien for the reasonable charges of hospital care, treatment and maintenance received by Selina M McKendall of 5874 Forrest Lake Cove, Sterrett, AL 35147, against all causes of action, suits, claims, counter claims and demands accruing to the said Selina M McKendall or her legal representative, and against all judgments, settlements and settlement agreements entered into by virtue thereof and on account of such injuries giving rise to such causes of action, suits, claims, counter claims, demands, judgments, settlements or settlement agreements and which necessitated such hospital care.

settlements or settlement a	greements and wh	ich necessitated such hospital	care.
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Amount Claimed:	\$4,121.14	Date of Admission:	02/06/2009
Date of Injury:	02/06/2009	Date of Discharge:	02/06/2009
	<b>→</b>	<u> </u>	such injured person, or the legal njuries are, to the best of the claimant's
Name:		Name:	
Address:		Address:	
Name:		Name:	
Address:		Address:	
Before me, Alabama, personally appe	ared, Barbara Donative for the claims, and that the same this	nahoo who being by me first ant, and as such has personal e are true and correct	Hospital Lien Prepared by: Nikisha Loftin L450, 619 19 <sup>th</sup> Street South Birmingham, AL 35249  or the County of Jefferson, State of duly sworn, doth depose and say that she knowledge of the facts set forth in the

NOTARY PUBLIC STATE OF ALABAMA AT LARGE MY COMMISSION EXPIRES: Jan 22, 2012 RONDED THRU NOTARY PUBLIC UNDERWRITERS

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