

09/20/2012 10:14:32 AM FILED/CERT

Public Notary

NOTICE OF HOSPITAL LIEN BAPTIST HEALTH SYSTEMS

833 Princeton Avenue SW, suite 300, Birmingham, AL 35211

STATE OF ALABAMA SHELBY COUNTY

Notice is hereby given, as provided by the laws of the State of Alabama that **BAPTIST HEALTH SYSTEMS** whose address is 833 Princeton Avenue SW, suite 300, Birmingham, AL 35211, which operates **Walker Baptist Medical Center**, located at 3400 US Highway 78 East, Jasper, AL 35501, claims a lien for the reasonable charges of hospital care, treatment and maintenance received by **Glenda Banks** of **1789 Forester Rd, Jasper, AL 35504**, against all causes of action, suits, claims, counter claims and demands accruing to the said **Glenda Banks** or his 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.

Amount claimed: \$16,304.00 Date of admission: 04/17/12 Date of injury: 04/17/12 Date of discharge: 04/20/12

The names and addresses of all persons, firms or corporations claimed by such injured person, or the legal representative of such person, to be liable for damages arising from such injuries are, to the best of the claimant's knowledge, as follows:

Name: Nationwide Insurance, clm# 52512002766 Name: Jim Oros, Jr., Esq.

Address: PO Box 26005, Daphne, AL 36526 Address: 2450 Valleydale Rd, Bham, AL 35244

Hospital Lien prepared by: Tien Nguyen

Duly authorized representative of Baptist Health Systems

The Outsource Group, 7 Audubon Road, Wakefield MA 01880

File# 3252360

Commonwealth of Massachusetts

County of Middlery

On this, the $\frac{27}{\text{day of }}$ day of $\frac{1}{\text{legal}}$, $\frac{20}{\text{legal}}$, before me a notary public, the undersigned person, personally appeared $\frac{1}{\text{legal}}$, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged that he executed the same for the purposes therein contained.

In witness hereof, I hereunto set my hand and official seal.

Notary Public

COMMONWEALTH OF MASSACHUSETTS

My Commission Expires

February 17, 2017