

NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

JT Ste 720, 619 19th 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, JT 720, 619 19th 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: Zachary Dennis of 1697 County Road 454, Clanton, AL 35046, against all causes of action, suits, claims, counter claims and demands accruing to the said Zachary Dennis or his/hers 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.

064881327-2338

Amount Claimed: \$386,134.31	Date of Admission: 12/04/2012
Date of Injury: 12/03/2012	Date of Discharge: 01/02/2013
■ · · · · · · · · · · · · · · · · · · ·	or corporations claimed by such injured person, or the legal damages arising from such injuries are, to the best of the claimant's
Name:	Name:
Address:	Address:
Name:	Name:
Address:	Address:
By: Duly Authorized Repr Before me, Duly Authorized Repr Alabama, personally appeared, Thomas Elme is the authorized representative for the claimar foregoing statement of lien, and that the same Subscribed and sworn to before me this	a Notary Public in and for the County of Jefferson, State of who being by me first duly sworn, doth depose and say that she/he at, and as such has personal knowledge of the facts set forth in the

BONDED THRU NOTARY PUBLIC UNDERWRITERS