

## NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

Shelby Cnty Judge of Probate, AL 05/15/2013 10:18:35 AM FILED/CERT

JT Ste 720, 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, JT 720, 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 Deborah Brown of 10676 Highway 55 Lot 6, Sterrett, AL 35147 against all causes of action, suits, claims, counter claims and demands accruing to the said Deborah Brown 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.

action, suits, claims	s, counter claims and	demands accruing to	o the said <u>Deboran Bi</u>	rown or his/hers legal
representative, and	against all judgment	ts, settlements and se	ttlement agreements	entered into by virtue thereof and
on account of such	injuries giving rise t	o such causes of acti	on, suits, claims, cou	nter claims, demands, judgments,
settlements or settle	ement agreements ar	nd which necessitated	d such hospital care.	
064918328-3123				
	Amount Claimed:	\$31,852.65	Date of Admission:	05/03/2013
	Date of Injury:	05/03/2013	Date of Discharge:	05/03/2013
The names and add representative of suknowledge, as follows	ich person, to be liab	, firms or corporation ole for damages arisin	ns claimed by such in ng from such injuries	jured person, or the legal are, to the best of the claimant's
Name:		Name:		
Address:		Address:		
Name:		Name:		
Address:		Address:		
is the authorized reforegoing statemen	By: Duly Authorized by appeared, Thomas presentative for the	a Notary P a Notary P s Elmes who being l claimant, and as such e same are true and c	Public in and for the Common part of the Common par	Hospital Lien Prepared by: Linda Allen JT 720, 619 19 <sup>th</sup> Street South Birmingham, AL 35249  County of Jefferson, State of n, doth depose and say that she/he edge of the facts set forth in the , 2013.  TE OF ALA EXPIRES: Sept 30, 2013 BY PUBLIC UNDERWRITERS

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