NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

20140528000160370 1/1 \$14.00 Shelby Cnty Judge of Probate, AL

POB 308, 1222 14th Ave S., Birmingham, AL 35249-6510 05/28/2014 11:29:58 AM FILED/CERT 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, POB 308, 1222 14th Ave S., Birmingham, AL 35205, 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: Beverly White of 175 Ellis Lane, Lincoln, AL 35096, against all causes of action, suits, claims, counter claims and demands accruing to the said Beverly White 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.

settlement agre	ements and	l which necessita	ted such hospital care.		
065015428-413	39				
Amoun	t Claimed:	\$ 20,069.00	Date of Admissi	ion: <u>05/19/2014</u>	<u></u>
Date of	Injury:	05/19/2014	Date of Discharg	ge: <u>05/20/2014</u>	_
	of such pers		ms or corporations claimed for damages arising from su		person, or the legal to the best of the claimant's
Name:	·	· · · · · · · · · · · · · · · · · · ·	Name:		
Address:	<u> </u>		Address:		
Name:	· · · · · · · · · · · · · · · · · · ·		Name:		
Address:	·	! !	Address:		
Alabama, personal the authorized reforegoing states	nally appeared the ment of lier	ared, Thomas Eleve for the claiman, and that the same	F ALABAMA HOSPITAL epresentative, UAB/PFS a Notary Public in and mes who being by me first ant, and as such has personate me are true and correct. day of day of	nd for the County duly sworn, doth al knowledge of t	, 2014.
					WINDA ALLEN