NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

POB 308 1222 14th Ave. S., Birmingham, AL 35205 1-888-309-8435 or 934-6400

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 ST. 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 Christopher J Sims of 699 Hwy 191, Jemison, AL 35085, against all causes of action,

| suits, claims, counter clair | ms and demands acc | ruing to the said Christophe | er J Sims or his legal rep | resentative, and |
|---|--|---|--|--|
| against all judgments, set | tlements and settlem | ent agreements entered into | by virtue thereof and on | account of such |
| injuries giving rise to sucl | h causes of action, su | uits, claims, counter claims, | demands, judgments, se | ttlements or |
| settlement agreements and | d which necessitated | such hospital care. | | |
| 065079794-5006 | | | | |
| Amount Claimed: | \$29,189.00 | Date of Admission: | 01/06/2015 | |
| Date of Injury: | 01/06/2015 | Date of Discharge: | 01/08/2015 | |
| The names and addresses representative of such per knowledge, as follows: | of all persons, firms rson, to be liable for | or corporations claimed by damages arising from such | such injured person, or injuries are, to the best o | the legal f the claimant's |
| Name: | | Name: | | - |
| Address: | | Address: | | - |
| Name: | | Name: | | |
| Address: | | Address: | | |
| I (| By: Marized Repr | ALABAMA HOSPITAL (C) (C) (C) (C) (C) (C) (C) (C) (C) (C) | POB 308 122 | ared by: Linda Allen 22 14 th Ave. S. m, AL 35205 |
| Before me | La delle | a Notary Public in and | for the County of Jefferso | on, State of |
| Alabama, personally appo | eared, <u>Colundra Mo</u> | Leod who being by me fir | st duly sworn, doth depo | se and say that she |
| • | | nt, and as such has persona | I knowledge of the facts | set forth in the |
| foregoing statement of lie | en, and that the same | are true and correct. | . 2015. | TO A MALLANDER |
| Subscribed and sworn to | before me this | day of | <u> </u> | 100 SELON EL |
| | • • • | | V State of the sta | NOTARY |
| | | Kund-all | () () () () () () () () () () | |
| 50126000026550 1/1 \$14.00 | Nota | ry Public | | PUBLIC |
| 1by Crty Judge of Probate: A | | • | | 12 March 4 Williams |

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