NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

POB 308, 619 19th ST. S., Birmingham, AL 35249-6510 1-888-309-8435 or 205-934-6400

THIS IS NOT A BILL



Shelby Cnty Judge of Probate, AL 10/16/2015 02:22:39 PM FILED/CERT

09/23/2015

Date of Admission:

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, 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: Kevin Page of 882 Pinegrove Road, Harvest, Alabama 35749 against all causes of action, suits, claims, counter claims and demands accruing to the said Kevin Page 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.

065163122-5266

Amount Claimed:

\$29,866.00

	Date of Injury:	09/23/2015		Date of Disc	narge:	09/24/2015
representa	es and addresses of a ative of such person se, as follows:	•	•	•	•	_
Name:			Name:			
Address:			Address:			
	By:	MAMA	LABAMA HOSPI LLQQ sentative, UAB/PFS	P	OB 308, 61	pared by: Brandy Lewis 19 19 th Street South ham, AL 35249
Alabama, is the auth	personally appeared norized representative statement of lien, and and sworn to before	d, Colundra McLove for the claimant and that the same at the column of t	eod, who being by and as such has perfect true and correct. day of	ersonal knowledge of CHOBER	doth de fac	pose and say that she ts set forth in the
		Motary	y Public	Mult		
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