- ·	
STATE OF ALABAMA	
COUNTY OF Shelby	4 <b>5</b> 70
,	
Notice is hereby given, as provided by	y the laws of the State of Alabama that Bessemer
Carraway Medical Center, whose address	: If P.O. Box 847, Highway 11 South,
Bessemer, Alabama, operating Bessemer	Carraway Medical Center at P.O. Box 847
Highway II South Bessemer, Alabama 350	021 claims a lien for reasonable charges for
nospital care, treatment and maintenan	nce necessitated by injuries received by
Hattie Anderson 2026 15th St Name of Patient	t No of Bessemer , Alabama, 35020
	inter claims and demands accuring to the
said Hattie Anderson or his or her	local representative and sent a 11
Name of Patient	regar representative, and against all
	• announce
On account of such injuries olving rie	nt agreements entered into by virtue thereof and se to such causes of action, suits, claims demands
judgements and which necessitated such	bospitel cars
Amount claimed: \$517.00 #15199660	0 <b>0</b>
Date of injury received: 12/28/89	
Date of admission into hospital: 12/28	
· •	
Date of patient discharged from hospit	a1: 12/28/89
The names and addresses of all persons	, firms or corporations claimed by such injured
person, or the legal representative of	such person, to be liable for damages arising
from such injuries are, to the best of	claimant's knowledge, as follows:
Hattie Anderson	
nactic Ander Boll	
2026 15th St. No	,
Bessemer, AL 35020	
	Bessemer Carraway Medical Center
	(CLAIMANT)
Refore me. Edna Munall Banks Nat	· · · · · · · · · · · · · · · · · · ·
State of Alabama personally appeared	ary Public in and for the County of Jefferson
State of Alabama, personally appeared	· - · · · · · · · · · · · · · · · · · ·
for the eleternt and an out to	(official Capacity)
following statement of lies and the	onal knowledge of the facts set forth in the
following statement of lien, and that	the same are true and correct.
Subscribed on sworn to before	
me on this theday of	January Youthun
- <b>AA</b>	(AFFIANT)
19 <u>90</u> , by said affiant.	(AFFIANI)
en ul al K	
odna Wysell & Danks	
NOTARY PUBLIC	and Pal
	STATE OF ALA. SHELBY UIL.
	SINT CERTIFY THIS IL FO
	STATE OF ALA. SHELMI COME  I CERTIFY THIS  INSTRUMENT WAS FILED  (Acc) 2-50
Date   filed:	INSTRUMENT THE HELD J.SO
	90 JAN -8 AMII: 54 Jud 3.00
Hour filed:	90 JAN Cert 1.00
	JUDGE OF PROBATE
	WOCE OF PROBATE
	HAUL -