

Notice is hereby given, as provided by the laws of the State of Alabama that CARRAWAY METHODIST MEDICAL CENTER, whose  
(name of person, firm, hospital authority, or corporation)  
address is 1600 26TH STREET NORTH, BIRMINGHAM, Alabama,  
(street) (city or town)  
operating CARRAWAY METHODIST MEDICAL CENTER at 1600 26TH STREET NORTH,  
(name of hospital) (street)  
BIRMINGHAM claims lien for reasonable charges for  
(city or town)  
hospital care, treatment and maintenance necessitated by injuries received  
by ELIZABETH DENISE DAVIS of 2619 SOUTHBERRY CIRCLE, BIRMINGHAM,  
(name of patient) (street) (city or town)  
ALABAMA 35226, against all causes of action, suits, claims,  
(state)

counter claims and demands accruing to the said ELIZABETH DENISE DAVIS, or  
(name of patient)  
his or her legal representative, and against all judgements, 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, judgements, settlements, or settlement agreements  
and which necessitated such hospital care. (4710.00)  
ADDITIONAL CHARGES \$3275.00 NEW TOTAL AMOUNT IS FOUR THOUSAND SEVEN HUNDRED TEN AND 00/100  
Amount claimed: ONE THOUSAND FOUR HUNDRED THIRTY-FIVE AND 00/100 (1435.00)  
Date of injury received: 7-8-90  
Date of admission into hospital: 7-8-90  
Date patient discharged from hospital: 7-9-90

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 the  
claimant's knowledge, as follows:

ELIZABETH DAVIS-DEPENDENT OF BILL DAVIS	2619 SOUTHBERRY CIRCLE	BIRMINGHAM AL 35226
ERIC DAVIS	ADDRESS UNKNOWN	
ANNA WRIGHT	ADDRESS UNKNOWN	
		3.50
		3.00
		1.00
		6.50
		6.50

STATE OF ALA. SHELBY CO.  
I CERTIFY THIS  
INSTRUMENT WAS FILED

90 AUG 20 AM 11:02

CARRAWAY METHODIST MEDICAL CENTER  
(Claimant)

Before me, DONNA C. ELLENBURG, a Notary Public in and for the  
County of JEFFERSON, State of Alabama, personally appeared  
DANA CHAMBLESS, the INSURANCE CLERK for the claimant,  
(official capacity)

and as such has personal knowledge of the facts set forth in the foregoing  
statement of lien, and that the same are true and correct.

Subscribed and sworn to before  
me on this the 16 day of AUGUST  
1990, by said affiant.

Dana Chambless  
(Affiant)

Donna C. Ellenburg  
NOTARY PUBLIC

Date Filed: \_\_\_\_\_  
Hour Filed: \_\_\_\_\_

THIS INSTRUMENT PREPARED BY:  
DANA CHAMBLESS ON BEHALF OF  
CARRAWAY METHODIST MEDICAL CENTER  
1600 26th ST NORTH  
BIRMINGHAM, ALABAMA

35234