STATE OF ALABAMA				-
COUNTY OF Shelby				
Notice is hereby given, as provided by the bama, whose address is University of Alabama 35294 operating University of Alabama Hospital	a, whose address is U	niversity of Alabama at	Birmingha	m, Birmingham, Alabama
charges for hospital care, treatment and main	tenance necessitated b	y injuries received by	_Warren	Wittenberg (name of patient)
of <u>34 Dixie Ln</u> ,	Vincent (city or tow	<u> </u>	AL	(state)
against all causes of action, claims, counter claims and demands accruing to the said patient, or his or her 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, claims, counter claims, demands, judgments, settlements or settlement agreements and which, necessitated such hospital care.				
Amount plaimed:	\$24,045.12	inst # 1993	-24920	
Amount claimed:				
Date injury received:	6/18/93	08/20/1993-	-24920	
Date of admission into hospital:	6/18/93		(1 1 1 1 1 1 1 1 1 1	<u> </u>
Date patient discharged from hospital:	6/26/93	SHELBY COUNTY JUDGE	OF PROBATE 8.50	
Those persons, firms, corporation injuries sustained by the a as a result of being involvincluding such insurance cowhose names and identities	rations or other foresaid patients of the said patients of the said police of the said po	ers who caused ent on or near dent in or near sies and covera	June She	ntributed to the 18, 1993 by County licable thereto,
		ty of Alabama (Claim		
*	/ Universi	Clain (Clain	nant)	
Before me, Lub A. Roberto	, a Notary Public in	and for the County of	Jeffe	rson,
State of Alabama, personally appeared	in B. Kallings	, who being by me fire	st duly swo	rn, doth depose and say:
that he (she) is the claimant or Ataff (O	fficial capacity)	for the claimant, a	nd as such	has personal knowledge
of the facts set forth in the foregoing statemen	nt of lien, and that the	same are true and cor	rect.	(n, m)
SUBSCRIBED and sworn to before me this th	ne 18th day of _	tuto A. Me	ant) Herb	
	•	(Notary	Public)	
Date Filed:	NOTAR	Y PUBLIC STATE OF ALABAMA A	T LARGE.	
Hour Filed:	BONDE	OMMISSION EXPIRES: Jan. D THRU NOTARY PUBLIC UNDE	y, 1997. Rwriter s.	

Hospital Lien Law Form 01