

## STATE OF ALABAMA

COUNTY OF Shelby

Notice is hereby given, as provided by the laws of the State of Alabama, that The Board of Trustees of the University of Alabama, whose address is University of Alabama, whose address is University of Alabama at Birmingham, Birmingham, Alabama 35294 operating University of Alabama Hospital at 619 South 19th Street, Birmingham, Alabama 35233, claims a lien for reasonable

charges for hospital care, treatment and maintenance necessitated by injuries received by Warren Wittenberg  
(name of patient)

of 34 Dixie Ln, Vincent, AL  
(street) (city or town) (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 claimed: \$4,753.40

Date injury received: 8/20/93

Date of admission into hospital: 8/20/93

Date patient discharged from hospital: 8/20/93

The names and address 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:

Those persons, firms, corporations or others who caused or contributed to the injuries sustained by the aforesaid patient on or near August 20, 1993 as a result of being involved in an accident in or near Shelby County including such insurance companies, policies and coverage applicable thereto, whose names and identities are otherwise unknown at this time.

University of Alabama Hospital  
(Claimant)

Before me, Faye E. Williams, a Notary Public in and for the County of Jefferson,

State of Alabama, personally appeared P.G. Dunlap, who being by me first duly sworn, doth depose and say: that he (she) is the claimant or Administrative Asst. for the claimant, and as such has personal knowledge  
(Official capacity)

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 this the 7 day of September, 19 93:  
Peggy Dunlap  
(Affiant)

Faye E. Williams  
(Notary Public)

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

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

Hospital Lien Law Form 01  
PS-7120

09/14/1993-28107  
01:34 PM CERTIFIED  
SHELBY COUNTY JUDGE OF PROBATE

001 MJS

8.50

Inst # 1993-28107