STATE OF ALABAMA
COUNTY OF SHELBY
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 ST NORTH , BIRMINGHAM , Alabama, (street) (city or town)
operating CARRAWAY METHODIST MEDICAL CENTER at 1600 26TH ST NORTH ,
(name of hospital) (street)
BIRMINGHAM claims lien for reasonable charges for (city or town)
hospital care, treatment and maintenance necessitated by injuries receive
by DOUGLAS R ALDRIDGE of 253 BROOK FOREST CIRCLE, HELENA (city or town)
ALA 35080 , against all causes of action, suits, claims,
(state)
counter claims and demands accruing to the said <u>pouglas R ALDRIDGE</u> , 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 agreement
and which necessitated such hospital care.
and which necessicated sack nospitate acres
Amount claimed: <u>six thousand, six hundred ninety five and 00/100</u>
Date of injury received: 07 16 1993
Date of admission into hospital: 07 17 1993
Date patient discharged from hospital: 07 18 1993
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:
1. DOUGLAS RYAN ALDRIDGE 253 BROOK FOREST CIRCLE HELENA ALA 35080
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12/07/1993-38974
O1 # 37 PM CERTIFIED  SHELBY COURTY JUBBE OF PROBATE  8,50
SHELBY COUNTY ONL WCD  CARRAWAY METHODIST MEDICAL CENTER
<u>CARRAWAY METHODIST MEDICAL CENTER</u> (Claimant)
SANDRA SULLIVAN , the INSURANCE CLERK for the claimant (official capacity)
SANDRA SULLIVAN , the INSURANCE CLERK for the claimant (official capacity)
SANDRA SULLIVAN , the INSURANCE CLERK for the claimant (official capacity) and as such has personal knowledge of the facts set forth in the foregoing
SANDRA SULLIVAN , 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.
SANDRA SULLIVAN , 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
SANDRA SULLIVAN , 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 the facts set forth in the foregoing statement of lien, and that the same are true and correct.  Subscribed and sworn to before the facts set forth in the foregoing statement of lien, and that the same are true and correct.  Subscribed and sworn to before (Affiant)
SANDRA SULLIVAN , 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
SANDRA SULLIVAN , 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 1 day of DEC (Affiant)  19 93, by said affiant.
SANDRA SULLIVAN , 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 1 day of DEC (Affiant)  THIS INSURUMENT PREPARED BY SANDRA SULLIVAN ON BEHALF OF
SANDRA SULLIVAN , 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 1 day of DEC (Affiant)  THIS INSURUMENT PREPARED BY

Hour Filed:

BIRMINGHAM ALA 35234