STATE OF ALABAMA		
COUNTY OF Shelby		
bama, whose address is University of Alal	by the laws of the State of Alabama, that The Boarna, whose address is University of Alabama pital at 619 South 19th Street, Birmingham, Alab	a at Birmingham, Birmingham, Alabama
charges for hospital care, treatment and n	naintenance necessitated by injuries received b	y Paul King (name of patient)
of P.O. Box 403	Calera	AL. 35040
and against all judgments, settlements, and	(city or town) er claims and demands accruing to the said paid settlement agreements entered into by virtue, counter claims, demands, judgments, settleme	thereof and on account of such injuries
Amount claimed:	\$15,577.70	
Date injury received:	11/3/94	
Date of admission into hospital:	11/3/94	
	al: <u>11/7/94</u>	
Those persons, firms, cor injuries sustained by the as a result of being invoince including such insurance	porations or others who cause aforesaid patient on or neadlyed in an accident in or neadlyed in a policies and covers are otherwise unknown at t	ed or contributed to the r November 3, 1994 ar Shelby County rage applicable thereto,
	University of Alabam	
•	·	aimant) _
Before me, Jule 6. Dillian	, a Notary Public in and for the County of	f <u>Jefferson</u> ,
State of Alabama, personally appeared		first duly sworn, doth depose and say:
that he (she) is the claimant or <u>Admini</u>	strative Asst. for the claimant, (Official capacity)	and as such has personal knowledge
of the facts set forth in the foregoing stater	nent of lien, and that the same are true and o	correct.
SUBSCRIBED and sworn to before me this		ffiant) 
	-7	lian
	1/	y Public)
Date Filed:	11/17/1994-34261	
Hour Filed:	O8:39 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE	•

8.50

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Hospital Lien Law Form 01

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