

STATE OF ALABAMA
COUNTY OF SHELBY.

KEITH RAYMOND BROWN 26052704

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 CARRAWAY BOULEVARD, BIRMINGHAM, Alabama,
(street) (city or town)
operating CARRAWAY METHODIST MEDICAL CENTER 1600 CARRAWAY BOULEVARD,
(name of hospital) (street)
BIRMINGHAM ALA 35234 claims lien for reasonable charges for
(city or town)
hospital care, treatment and maintenance necessitated by injuries received
by KEITH RAYMOND BROWN of P.O. BOX 363, CALERA,
(name of patient) (street) (city or town)
ALABAMA 35040, against all causes of action, suits, claims,
(state)
counter claims and demands accruing to the said KEITH RAYMOND BROWN, 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.

Amount claimed: TWENTY FIVE THOUSAND, SIX HUNDRED EIGHTEEN AND 00/100.
Date of injury received: 01 26 1995.
Date of admission into hospital: 01 26 1995.
Date patient discharged from hospital: 01 30 1995.

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:

KEITH RAYMOND BROWN P.O. BOX 363 CALERA ALABAMA 35040
Inst # 1995-09902

02/19/1995-03902
01:22 PM CERTIFIED
CARRAWAY METHODIST MEDICAL CENTER
(Claimant) 8.50

Before me, DONNA C ELLENBURG, a Notary Public in and for the
County of JEFFERSON, State of Alabama, personally appeared
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 8 day of FEBRUARY
19 95, by said affiant.

S. Sullivan
(Affiant)

Donna C Ellenburg
NOTARY PUBLIC

THIS INSTRUMENT PREPARED BY
SANDRA SULLIVAN ON BEHALF OF:
CARRAWAY METHODIST MEDICAL CENTER
1600 CARRAWAY BOULEVARD
BIRMINGHAM ALA 35234

Date Filed: _____
Hour Filed: _____