



# CARRAWAY METHODIST MEDICAL CENTER

## ESTATE CLAIM FORM FOR ORGANIZATION

STATE OF ALABAMA )  
COUNTY OF SHELBY )

CASE NO. 33-235

The undersigned, CARRAWAY METHODIST MEDICAL CENTER, hereinafter referred to as claimant, herewith presents and files their claim against the Estate of CARROLL K BRINER JR, deceased, for and on account of the following

described indebtedness owing by said Estate of Claimant, viz:

AMOUNT: \$296.00  
ACCOUNT: 31143093

DATES OF SERVICE: 02 19 1995 THRU 03 07 1995  
Inst # 1995-16719

STATE OF ALABAMA )  
COUNTY OF JEFFERSON )

06/26/1995-16719  
01:15 PM CERTIFIED  
SHELBY COUNTY JUDGE OF PROBATE

Before me, the undersigned authority in and for said county in said State, personally appeared SANDRA SULLIVAN, who being first duly sworn, says that (s)he is INSURANCE CLERK of CARRAWAY METHODIST MEDICAL CENTER, the claimant, and that (s)he has full and complete knowledge of the correctness of the above claim against the Estate of CARROLL K BRINER JR, deceased, and the amount claimed is justly due (or to become due), and after allowing all proper credits.

S. Sullivan  
Signature of Authorized Personnel for Claimant

1600 CARRAWAY BLVD. BHAM ALA 35234  
Address

Subscribed and sworn to before me this 18 day of MAY, 19 95.

Danna C. Greenburg  
Notary Public

No One Cares Like Carraway

1600 Carraway Boulevard • Birmingham, AL 35234 • (205) 226-6000