

Lienholder: Shelby Medical Center
P.O. Box 488
Alabaster, Al 35007

Patient: ALLEN, DATRIAL

Lien Amount: \$ 10,059.65

STATEMENT OF HOSPITAL LIEN
Ala.Code 35-11-371(1975)

NOTICE IS HEREBY GIVEN, that Shelby Medical Center - 1000 1st St. No., Alabaster, Alabama, claims a lien for its reasonable charges incurred in the care, treatment, and maintenance of the above patient. This lien is claimed upon any and all actions, claims, counterclaims, and demands accruing to this patient, or their legal representative, and upon all judgments, settlements, and settlement agreements entered into by virtue thereof on account of the injuries giving rise to such actions, claims, counterclaims, demands, judgments, settlements or settlement agreements, which necessitated such care, treatment or maintenance.

Date Injured: 9/13/95

Patients Address: Allen, Mary/ mother of

Date Admitted: 9/14/95

129 Dana Drive

Date Discharged: 1/29/96

Montevallo, Al 35115

Claimant avers upon information and belief that the following persons, firms or corporations are or may be claimed by the patient to be liable for damages arising from his injuries:

Hewitt L. Conwill
Conwill & Justice - Attorney for Shelby County Bd of Education
P.O. Box 557
Columbiana, Al 35007

*Under Alabama Code Section 35-11-371 (1975), the filing of this lien constitutes notice to any persons liable for such damages whether or not they are named herein.

Lori Ann Swindall
Shelby Medical Center

State of Alabama)
Shelby County)

Personally appeared before me the undersigned Notary Public in and for said County and State, Lori Ann Swindall who being known to me did execute the above Statement of Hospital Lien in my presence and furthermore having been first duly sworn did upon oath state that (s)he executed the same with full authority and as the act of Shelby Medical Center.

Done this 16th day of April, 1996.

Virginia Beasley
Notary Public

04/19/1996-12751
10:01 AM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
001 MCD 8.50

Inst # 1996-12751