## STATE OF ALABAMA)

## COUNTY OF SHELBY)

Notice is hereby given, as provided by the laws of the State of Alabama, that the Board of Trustees of The University of Alabama, whose address is University of Alabama at Birmingham, Birmingham, Alabama 35294 operating University of Alabama Hospital at 619 South 19th Street, Birmingham, Alabama 35233, claims a lien to reasonable charges for hospital care, treatment and maintenance necessitated by injuries received by

**Chad Grubbs** 8939 Highway 32 Wilsonville, AL 35186

against all causes of action, claims, counter claims and demands accruing to the said patient, or his or her legal representative, and against all judgments, settlements agreements entered into by virtue thereof and on account of such injuries giving rise to such causes of action, claims, counter claims, demands, judgments, settlements or settlement agreements and which necessitated such hospital care.

Amount claimed:

Hospital Lien Form 01

\$5,938.74

Date injury received: 5/17/97

Date of admission into hospital: 5/17/97

Date patient discharged from hospital: 5/18/97

The names and address 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 claimant's knowledge, as follow:

	University of Alabama Hospital (Claimant)
before me Yolanda Rich , who being by me firs	in and for the County of <u>Jefferson</u> State of Alabama, personally appeared st sworn, doth depose and say that he (she) is the claimant or <u>Manager</u> ledge of the facts set forth in the foregoing statement of lien, and that the
same are true and correct.	Hatanda Sich (Affiant)
SUBSCRIBED and sworn to before me this the _	Christy D. Montari  (Notary Public)
Date Filed:	
Hour Filed:	MY COMMISSION EXPIRES REPTEMBER 22, 1988

06/19/1997-19228 10:08 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE ODI MEL