

**Lienholder: Baptist Health  
Systems SHELBY**

**Patient: EDWARD R. DAWKINS**

**Lien Amount: \$ 590.60**

**STATEMENT OF HOSPITAL LIEN**

**Ala.Code 35-11-371(1975)**

**NOTICE IS HEREBY GIVEN, that Baptist Medical Center - SHELBY Birmingham, 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: 04-08-98 Patients Address: \_\_\_\_\_**  
**Date Admitted: 05-26-98 80 SALEM ROAD**  
**Account Number: 30872782 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:**

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

*Felisa L. Carter*  
**SHELBY BAPTIST MEDICAL CENTER**

**State of Alabama )  
Shelby County )**

**Personally appeared before me the undersigned Notary Public in and for said County and State, FELISA L. CARTER 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 Baptist Health Systems.**

**Done this 29TH day of JUNE, 1998.**

*[Signature]*  
**Notary Public**

**Inst # 1998-25859**

**07/08/1998-25859  
02:12 PM CERTIFIED  
SHELBY COUNTY JUDGE OF PROBATE  
001 MCD 8.50**

**Inst # 1998-25859**