

Lienholder: BAPTIST HEALTH SYSTEM	STATEMENT OF HOSPITAL LIEN Ala.Code 35-11-371(1975)
Patient: ANNETTE SPEIGNER	
Lien Amount: \$532.00	

NOTICE IS HEREBY GIVEN, that BAPTIST HEALTH SYSTEM of 800 Montclair Road, 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 OF ACCIDENT: 05/28/98

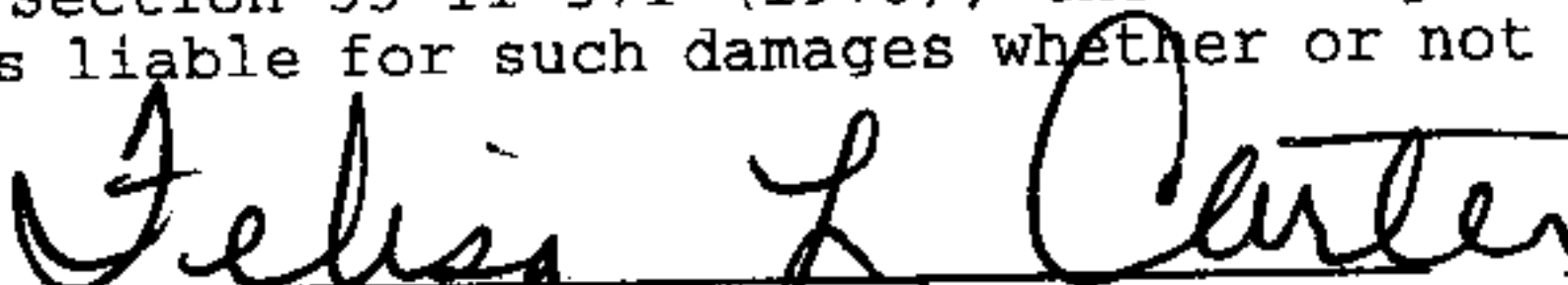
Patients Address:

Patient Account Number(s)  
30868939

2150 20TH ST APT C  
CALERA, AL 35040-6656

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/her injuries:

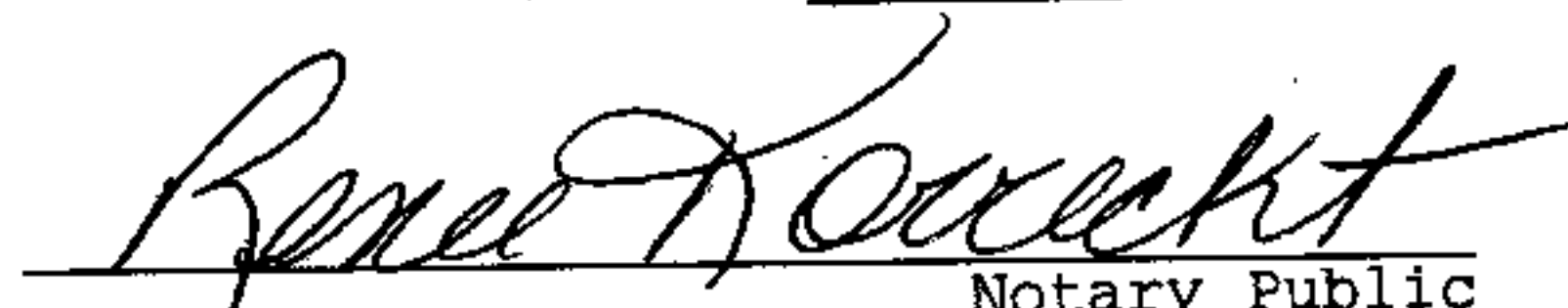
\*Under Alabama Code Section 35-11-371 (1975), the filing of this lien constitutes notice to any persons liable for such damages whether or not they are named herein.

  
BAPTIST HEALTH SYSTEM

State of Alabama )  
JEFFERSON COUNTY )

Personally appeared before me the undersigned Notary Public in and for said County and State, FELISA 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 she executed the same with full authority and as the act of BAPTIST HEALTH SYSTEM.

Done this 1ST DAY OF JULY, 1998.

  
Notary Public

07/15/1998-26801  
10:47 AM CERTIFIED  
SHELBY COUNTY JUDGE OF PROBATE  
001 MEL 8.50

Inst # 1998-26801