NOTICE OF HOSPITAL LIEN MEDICAL CENTER EAST, INC.

STATE OF ALABAMA SHELBY COUNTY

hospital of the same name at the same address treatment and maintenance received by Shand demands accruing to the said Shand all judgments, settlements and settlement agreements or settlement agreements and white the settlements of settlements and white the settlements are settlements or settlement agreements and white the settlements of settlements are settlements or settlement agreements and white the settlements of settlements are settlements or settlement agreements and white the settlements of settlements are settlements are settlements and white the settlements of settlements are settlements and white the settlements are settlements and white the settlements are settlements and white the settlement agreements are settlements.	ws of the State of Alabama that MEDICAL CENTER of East Drive, Birmingham, Alabama, which operates a set of claims a lien for the reasonable charges of hospital care, against all causes of action, suits, claims, counter claims of Strickland or his legal representative, and against elements entered into by virtue thereof and on account of ion, suits, claims counter claims, demands, judgments, ich necessitated such hospital care. Date of admission: 9-04-00 Date of discharge: 9-24-00
The names and addresses 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 the claimant's knowledge, as follows:	
Name: A/fa Ins.	Name:
Address: 705 pleasant Grove Rd. Pleasant Grove, Ac. 35127 Name: Edith Hayes	name:
Address: 2288 County Rd 109 Wilsonville, AL. 35186	Address: 10/05/2000-35012 O9:02 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 11.00
	MEDICAL CENTER EAST, INC. By: Leslie Pennington Assistant Director of Patient Accounts
Before me,, a Notary Public in and for the County of Jefferson, State of Alabama, personally appeared Leslie Pennington, who being by me first duly sworn, doth depose and say that he is he authorized representative for the claimant, and as such has personal knowledge of the facts set forth in the foregoing statement of lien, and that the same are true and correct. Subscribed and sworn to before me this day of	
	Notary Public Tina McClaran Notary Public Notary Public My Commission Expires April 17, 2001