

LIENHOLDER: University Of Alabama Hospital At Birmingham

STATEMENT OF HOSPITAL LIEN  
ALA. CODE 35-11-371(1975)

PATIENT: Michael Cole

LIEN AMOUNT: \$22,533.18

NOTICE IS HEREBY GIVEN, that University Of Alabama Hospital At Birmingham Jefferson County, 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: 6/1/00

Patients Address:

Date Admitted: 6/1/00

381 Wade Drive  
Montevallo, Al. 35115

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



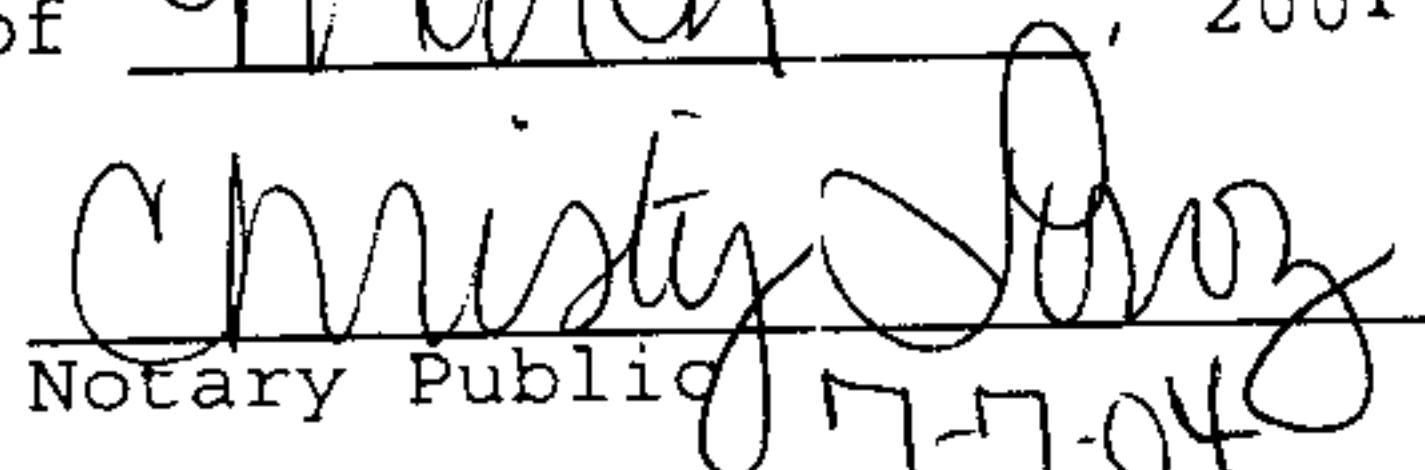
Attorney for Lienholder

Post Office Box 11366  
Birmingham, Alabama 35202  
(205) 250-8437

STATE OF ALABAMA )  
COUNTY OF JEFFERSON )

Personally appeared before me the undersigned Notary Public in and for said County and State, who being know 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 he executed the same with full authority and as the act of

Done this the 1<sup>st</sup> day of March, 2001.



Notary Public

File No: 00-26688

03/02/2001-07322  
01:09 PM CERTIFIED  
SHELBY COUNTY JUDGE OF PROBATE  
001 RMB 11.00

Inst # 2001-07322