2002

Lienholder: Baptist Health

System, Inc.

GUARANTOR - Nancy Malone

Patient: Nancy Malone

Lien Amount: \$1055.00

STATEMENT OF HOSPITAL LIEN
Ala.Code 35-11-371(1975)

NOTICE IS HEREBY GIVEN, that Baptist Health System Inc in 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.

Patient Address: 8228 Hwy 17, Maylene, AL 35114

DATE OF INJURY : 03/01/2002

ACCT #(S): 34594267 DATE OF SERVICE 03/01/2002

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 35-11-37 (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, <u>BETH MERCHANT McGAUGHY</u> 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 System, Inc.

Done this 27th day of March, 2002

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Notary Public

Cc: Nancy Malone

State Farm Insurance; CLM# 01-6333-447

O4/O4/2002-15794
O1:09 PM CERTIFIN
SHELBY COUNTY JUDGE OF PROBATE
11.00