

LIENHOLDER:
University Hospital at Birmingham

HOSPITAL LIEN

Statement of Hospital Lien
ALA. CODE – 35-11-371 (1975)

PATIENT: William Trice

LIEN AMOUNT: \$ 29,096.78



20030613000371270 Pg 1/1 11.00
Shelby Cnty Judge of Probate, AL
06/13/2003 09:27:00 FILED/CERTIFIED

NOTICEIS 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.

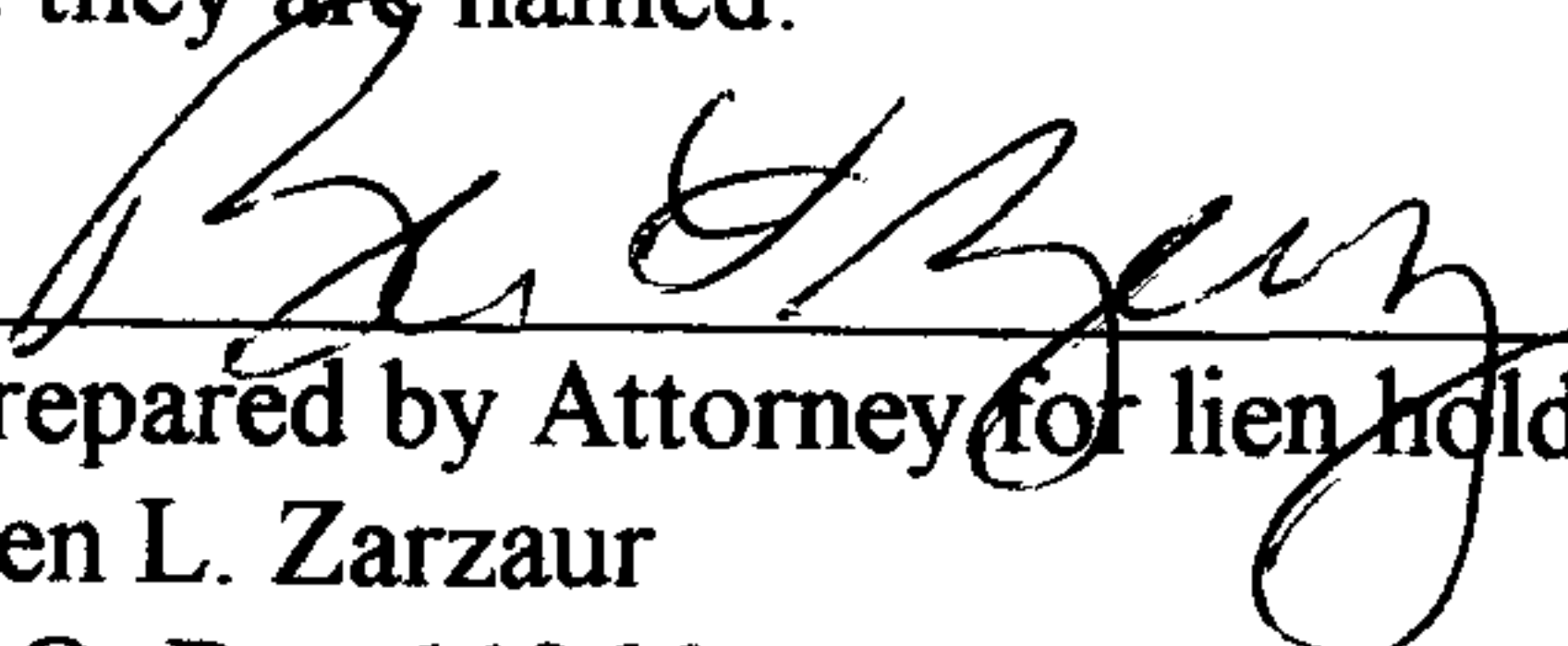
Date injured: March 25, 2003

Patients Address: 20 Meadow Crest Farm Rd
Wilsonville, AL 35186

Date Admitted: March 25, 2003

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:

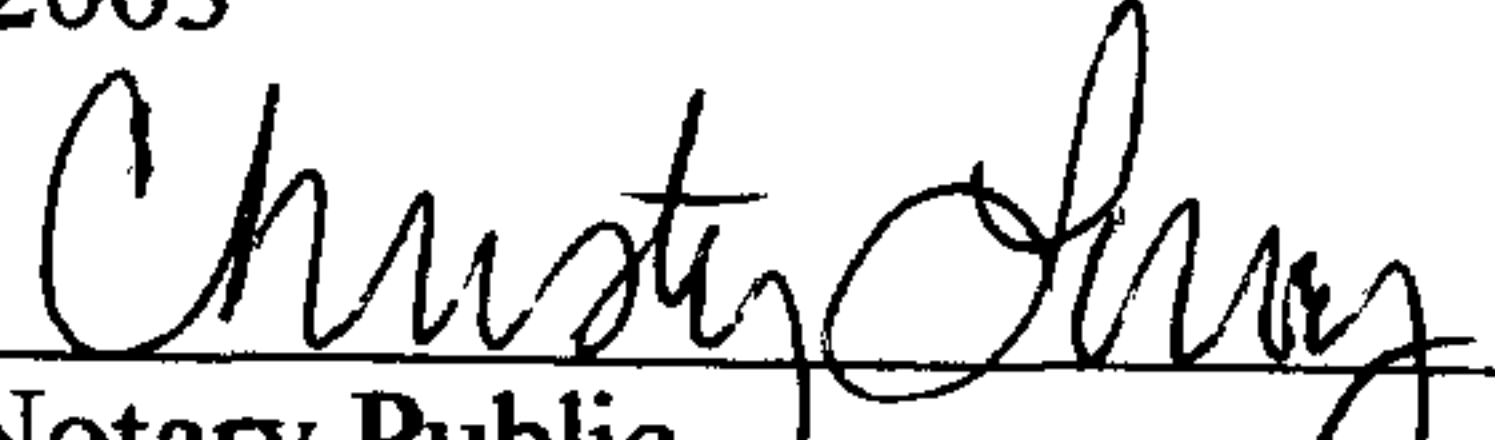
*Under Alabama Code Section 35-11-371 (1975), the filing of this lien constitutes notice to any persons liable for such damages whether or not they are named.


Prepared by Attorney for lien holder
Ben L. Zarzaur
P.O. Box 11366
Birmingham, AL 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, Ben L Zarzaur 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 he executed the same with full authority and as the act of Attorney for the Lienholder.

Done this the 6th day of June, 2003


Notary Public
My Commission Expires: 7/7/04

-File No: 03-34916-0