

## NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

LNB Ste 450, 619 19<sup>th</sup> ST. S., Birmingham, AL 35249-6510

## STATE OF ALABAMA SHELBY COUNTY

Notice is hereby given, as	provided by the laws	of the State of Alabama th	at UNIVERSITY OF ALABAMA
HOSPITAL whose address	s is, LNB 450, 619 19 <sup>th</sup>	'ST. S., Birmingham, AL 3	5249-6510, which operates a hospital
of the same name at the sa	me address, claims a l	lien for the reasonable cha	rges of hospital care, treatment and
maintenance received by:	Vickie Kay Cream	er of 7800 H	wy 17, 90 Cedar Grove MHP, Maylene, Al 35114
against all causes of action	ı, suits, claims, counte	er claims and demands acc	ruing to the said Vickie Kay Creamer
or his legal representative,	and against all judgm	ents, settlements and settl	ement agreements entered into by
virtue thereof and on accor	unt of such injuries gi	ving rise to such causes of	action, suits, claims, counter claims,
demands, judgments, settle	ements or settlement a	greements and which nec	essitated such hospital care.
064139296.5041			
Amount Claimed:	\$26,049.06	Date of Admission:	02/10/2005
Date of Injury:	02/10/2005	Date of Discharge:	02/13/2005
	son, to be liable for da	•	such injured person, or the legal njuries are, to the best of the
Name:	<del></del>	Name:	
Address:		Address:	
Name:		Name:	
Address:		Address:	
Before me, testing Alabama, personally appear	y: Muly Authorized Representative for the ment of lien, and that	tary Public in and for the extension who being by me claimant, and as such hat the same are true and corrections.	Hospital Lien Prepared by: Tomekia Wilson LNB 450, 619 19th Street South Birmingham, Alabama 35249-6510  County of Jefferson, State of the first duly sworn, doth depose and as personal knowledge of the facts set sect.
		etta a. F.u	شرب المالية

Notary Public notary public state of alabama at large my Commission expires: Jan 22, 2008 BONDED THRU NOTARY PUBLIC UNDERWRITERS

1258