20050314000114720 1/1 $11.00
Shelby Cnty Judge of Probate,AL
03/14/2005 03:52:01PM FILED/CERT

NOTICE OF HOSPITAL LIEN
UNIVERSITY OF ALABAMA HOSPITAL
LNB Ste 450, 619 19th ST. S., Birmingham, AL 35249-6510

STATE OF ALABAMA
SHELBY COUNTY

AMENDED LIEN: BOOK: 2004 PAGE: 0929000536970

Notice is hereby given, as provided by the laws of the State of Alabama that **UNIVERSITY OF ALABAMA HOSPITAL** whose address is, **LNB 450, 619 19th ST. S., Birmingham, AL 35249-6510**, which operates a hospital of the same name at the same address, claims a lien for the reasonable charges of hospital care, treatment and maintenance received by: Julie Williams of 42 Chalet Dr, Manchester, Tn 37355 against all causes of action, suits, claims, counter claims and demands accruing to the said Julie Williams or his legal representative, and against all judgments, settlements and settlement agreements entered into by virtue thereof and on account of such injuries giving rise to such causes of action, suits, claims, counter claims, demands, judgments, settlements or settlement agreements and which necessitated such hospital care.

064096931.4240, 4338, 5055

Amount Claimed: $287,102.34

Date of Admission: 08/27/2004, 12/08/2004, 02/28/2005

Date of Injury: 08/27/2004

Date of Discharge: 09/15/2004, 12/11/2004, 03/02/2005

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: Nationwide Insurance Company
Clm# 010013891 (Patrick Saindon)
Address: 4100 Colonnade Pkwy, Ste 150
B'Ham, Al 35243

Name: Patrick Saindon
518 Moss Creek Circle
Address: Helena Al 35080

Name: Mendota Insurance Company
Clm# PA 0679611
Address: P. O. Box 64801
St. Paul, MN 55164-0805

Name:
Address:

UNIVERSITY OF ALABAMA HOSPITAL

By: Mark D. Garst

Duly Authorized Representative, UAB/PFS

Hospital Lien Prepared by: Tomekia Wilson
LNB 450, 619 19th Street South
Birmingham, Alabama 35249-6510

Before me, Rosetta A. Square a Notary Public in and for the County of Jefferson, State of Alabama, personally appeared, **Mark D. Garst** who being by me first duly sworn, doth depose and say that he is the 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 9th day of March, **2005**.

Rosetta A. Square

Notary Public NOTARY PUBLIC STATE OF ALABAMA AT LARGE
MY COMMISSION EXPIRES: Jan 22, 2008
BONDED THRU NOTARY PUBLIC UNDERWRITERS

12.00 90