

NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

LNB Ste 450, 619 19th ST. S., Birmingham, AL 35249-6510

STATE OF ALABAMA SHELBY COUNTY

Notice is	hereby given, as	provided by the law	s of the State of Alabama t	hat UNIVERSITY OF ALABAMA
HOSPITA	L whose address	s is, LNB 450, 619 1	9 th ST. S., Birmingham, AL	35249-6510, which operates a hospital
of the san	ne name at the sa	me address, claims	a lien for the reasonable cha	arges of hospital care, treatment and
maintenance received by:Shelbie K. Sn			nith of 6741	Lakes Edge Lane, Pinson, Al 35126
against al	l causes of action	ı, suits, claims, cour	iter claims and demands ac	cruing to the said Shelbie K. Smith
or his lega	al representative,	and against all judg	ments, settlements and sett	lement agreements entered into by
virtue the	reof and on acco	unt of such injuries	giving rise to such causes o	f action, suits, claims, counter claims,
demands,	judgments, settle	ements or settlemen	t agreements and which ned	essitated such hospital care.
06418908	2.5329			
Amount Claimed:		\$19,577.18	Date of Admission:	12/02/2005
Date of Injury:		07/22/2005	Date of Discharge:	12/04/2005
representa		son, to be liable for o		such injured person, or the legal injuries are, to the best of the
	Clm 7701P7805	330729200501		
Address:	4100 Colonnade Pkwy, Ste 150		Address:	
	B'Ham, Al 35243			
Name:	Danny West		Name:	
Address:	Unknown		Address:	
Alabama,	By Di	y: Mark D. C.	esentative, UAB/PFS Notary Public in and for the larst who being by a	Hospital Lien Prepared by: Tomekia Wilso 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
		-	at the same are true and cor	
Subscribe	d and sworn to b	efore me this 7th	day of Lienter, 2005	•

Notary Public

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