

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 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: Bobby Dowdell of P.O. Box 1237 Alabaster, AL 35007, against all causes of action, suits, claims, counter claims and demands accruing to the said Bobby Dowdell 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.

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064383088-7247			
Amount Claimed:	\$25,307.47	Date of Admission:	09/04/2007
Date of Injury:	09/04/2007	Date of Discharge:	09/06/2007
	on, to be liable for o	•	such injured person, or the legal njuries are, to the best of the
Name:		Name:	
Address:	· -	Address:	
Name:		Name:	
Address:		Address:	
Before me, $\frac{By}{\cos e \mathcal{H}_A}$	Is Authorized Representation	esentative, UAB/PFS a Notary Public in and f	Hospital Lien Prepared by: Dorothy McCur LNB 450, 619 19th Street South Birmingham, Alabama 35249-6510 For the County of Jefferson, State of first duly gwern, dath danger and gave
			first duly sworn, doth depose and say rsonal knowledge of the facts set
forth in the foregoing states	ment of lien, and the efore me this	t the same are true and corrected day of Author	ect. Lee, 2007.

Notary Public

NOTARY PUBLIC STATE OF ALABAMA AT LARGE MY COMMISSION EXPIRES: Jan 22, 2008 BONDED THRU NOTARY PUBLIC UNDERWRITERS 3242