

NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

LNB Ste 450, 619 19th ST. S., Birmingham, AL 35249-6510 1-888-309-8435 or 934-6405

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: Stephanie Smith of 215 Brynleigh Circle, Chelsea, AL 35043, against all causes of action, suits, claims, counter claims and demands accruing to the said Stephanie Smith or her 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.

demands	, judgments, settl	ements or settleme	ent agreements and which ned	cessitated such hospital care	3.
0643957	87-7793				
Amount Claimed:		\$24,180.11	Date of Admission:	10/20/2007	
Date of Injury:		10/20/2007	Date of Discharge:	10/22/2007	
represent		son, to be liable fo	ns or corporations claimed by r damages arising from such		
Name:	Robert Fleming		Name:		
	12565 Hwy 41 Nor				
Address:	Leeds, AL 35094		Address:		
Name:			Name:		
Address:			Address:		
		y: <u>Szertzez</u> uly Authorized Rep	ALABAMA HOSPITAL Jonnalia Oresentative, UAB/PFS	Hospital Lien Prepared by: LNB 450, 619 19th Birmingham, Alabam	Street South a 35249-6510
Before m	e, 1505e44A	A-Square	a Notary Public in and for	or the County of Jefferson,	State of
Alabama,	, personally appea	ared, <u>Barbara Do</u>	nahoo who being by me firs	t duly sworn, doth depose a	and say that
he is the	authorized represe	entative for the cla	imant, and as such has person	nal knowledge of the facts	set forth in
the forego	oing statement of	lien, and that the	same are true and correct.		
Subscribe	ed and sworn to b	efore me this	4th day of October	<u>(200'</u>	7.
				2	

Votary Public

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