20080603000225020 1/1 \$11.00 Shelby Cnty Judge of Probate, AL 06/03/2008 02:43:58PM FILED/CERT

## NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

LNB Ste 450, 619 19<sup>th</sup> 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 19<sup>th</sup> 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: Roger Underwood of 400 Co Rd 795, Montevallo, AL 35115, against all causes of action, suits, claims, counter claims and demands accruing to the said Roger Underwood 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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Amount Cla	aimed:	\$ 46,754.02	Date of Admis	ssion:	05/22/2008	
Date of Inju	ıry:	05/22/2008	Date of Discha	arge:	05/24/2008	•
	ich pers	· · · · · · · · · · · · · · · · · · ·	<u> </u>	_	such injured person, or the njuries are, to the best of th	_
Name:			Name:			
Address:			Address:			
Name:			Name:			
Address:			Address:			
			ALABAMA HOSPIT	AL	Hospital Lien Prepared I L450, 619 19 <sup>th</sup> St Birmingham, A	reet South
Alabama, personall is the authorized re	y appe present	ared, <u>Barbara Don</u> ative for the claima	ahoo who being by m	e first	the County of Jefferson, and duly sworn, doth depose a knowledge of the facts set	nd say that she
		Nota	ry Public	reat	inai	

NUTARY PUBLIC STATE OF ALABAMA AT LARGE MY COMMISSION EXPIRES: Sept 12, 2011 BONDED THRU NOTARY PUBLIC UNDERWRITERS