

## 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: James Vallely of 428 Abbott Square, Birmingham, AL 35242, against all causes of action, suits, claims, counter claims and demands accruing to the said James Vallely 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.

action, sui	ts, claims, count	ter claims and demai	nds accruing to the said Jam	es vallely or his legal representative, and
against all	judgments, sett	lements and settleme	ent agreements entered into	by virtue thereof and on account of such
injuries gi	ving rise to such	causes of action, su	its, claims, counter claims,	demands, judgments, settlements or
settlement	agreements and	l which necessitated	such hospital care.	
06443312	8 8086, 8133			
Amount Claimed: \$697,357.77		Date of Admission:	03/26/08, 05/12/08	
Date of Injury: 03/26/2008		Date of Discharge:	05/12/08, 05/23/08	
representa		_	<del>-</del>	such injured person, or the legal njuries are, to the best of the claimant's
Name:	Geico		Name:	
	Attn.: Jarmaal Hamilton			
Address:	1 Geico Center		Address:	
	Macon, GA 31296			
Name:	Clm# 0309840870101018		Name:	
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Address:	-		Address:	· · · · · · · · · · · · · · · · · · ·
Alabama, is the auth	personally apperorized representation	ouly Authorized Representative for the claiman, and that the same perfore me this 27	ahoo who being by me first	Hospital Lien Prepared by: Nikisha Loftin L450, 619 19 <sup>th</sup> Street South Birmingham, AL 35249  or the County of Jefferson, State of duly sworn, doth depose and say that she knowledge of the facts set forth in the

Notary Public

NOTARY PUBLIC ETATE OF ALABAMA AT LARGE MY COMMISSION EXPIRES: Jan 22, 2012 BONDED THRU NOTARY PUBLIC UNDERWRITERS