

STATE OF ALABAMA )  
OFFICE OF THE JUDGE OF PROBATE )  
COUNTY OF Shelby )

20080619000250880 1/1 \$11.00  
Shelby Cnty Judge of Probate, AL  
06/19/2008 01:12:44PM FILED/CERT

**NOTICE OF HOSPITAL LIEN**

Notice is hereby given by Shelby Baptist Medical Center located at 1000 First Street North, Alabaster, AL 35007, operated by Baptist Health System located at 833 Princeton Avenue, SW, POB III, Suite 300, Birmingham, AL 35211, that Shelby Baptist Medical Center has furnished reasonable and necessary hospital care, treatment and/or maintenance to:

Jeffrey M. Lockhart  
1426 Taylor Avenue  
Clanton, AL 35045

from 12/16/2007 to 12/16/2007 and that the amount due for the services is \$ 5,875.00.

The person(s), firm(s), or corporation(s) claimed by the patient or his/her representative to be liable for damages arising from the illness or injuries for which the patient received health care services are as follows:

Unknown at Present

A lien is hereby created by the hospital upon any and all actions, claims, counterclaims, and demands accruing to the patient on account of the injuries which necessitated such hospital care and upon all judgments, settlements, and settlement agreements entered into on account of the injuries which necessitated such hospital care, all in accordance with the provisions of Alabama Code Annotated §35-11-370, et seq.

Prepared By:

Shelby Baptist Medical Center

Cassie Entrekin

Cassie Entrekin  
Medical Reimbursements of America, LLC  
o/b/o Shelby Baptist Medical Center  
425 Duke Dr., Suite 475  
Franklin, TN 37067  
(615) 963-3871

STATE OF TENNESSEE  
COUNTY OF WILLIAMSON

The foregoing statement was acknowledged and verified before me, on June 13, 2008, by Cassie Entrekin, the duly authorized agent of Shelby Baptist Medical Center, for an on behalf of said hospital.

Sandie L. Milliken  
Notary Public

My Commission Expires:

11/24/2008

