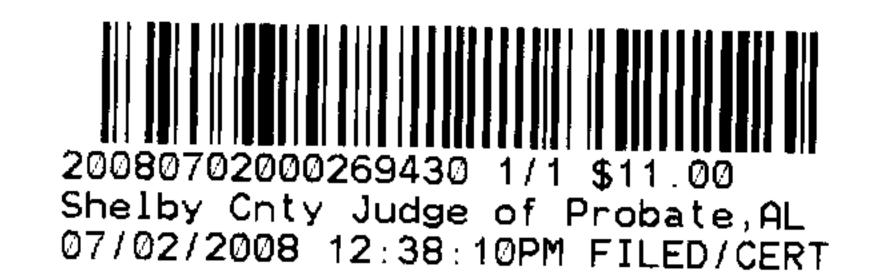
STATE OF ALABAMA	`
OFFICE OF THE JUDGE OF PROBATE	•
COUNTY OF Shelby	`



## NOTICE OF HOSPITAL LIEN

Notice is hereby given by Coosa Valley Medical Center located at 315 W. Hickory St., Sylacauga, AL 35150, operated by The Sylacauga Health Care Authority located at 315 W. Hickory St., Sylacauga, AL 35150, that Coosa Valley Medical Center has furnished reasonable and necessary hospital care, treatment and/or maintenance to:

Chastity Massey 290 Dogwood Lane Vincent, AL 35178

from 12/22/2006 to 12/22/2006 and that the amount due for the services is \$2,631.50.

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:

Quality Casualty Insurance 10700 Montgomery Road Suite 210 Cincinnati, OH 45242 Claim # QA09507-16A,

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.

Coosa Valley Medical Center

Prepared By:

Cassie Entrekin

Medical Reimbursements of America, LLC

NOTARY

PUBLIC

o/b/o Coosa Valley 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 30, 2008, by Cassie Entrekin, the duly authorized agent of Coosa Valley Medical Center, for an on behalf of said hospital.

Notary Public

My Commission Expires:

11 2008