

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

20080702000269430 1/1 \$11.00
Shelby Cnty Judge of Probate, AL
07/02/2008 12:38:10PM FILED/CERT

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
Cassie Entrekin
Medical Reimbursements of America, LLC
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.

Sandie L. Milliken
Notary Public

My Commission Expires: 11/24/2008

