## 20080908000356900 1/1 \$11.00 Shelby Cnty Judge of Probate, AL 09/08/2008 02:01:58PM 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: Ashley Putman of 3989 Christopher Drive, Birmingham, AL 35243, against all causes of action, suits, claims, counter claims and demands accruing to the said Ashley Putman or her 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.

on account of such injuries giving rise to such causes of action, suits, claims, counter claims, demands, judgments, 064471565.8240 Amount Claimed: \$36,499.73 Date of Admission: 08/27/2008 08/27/2008 Date of Discharge: Date of Injury: 08/30/2008 The names and addresses of all persons, firms or corporations claimed by such injured person, or the legal representative of such person, to be liable for damages arising from such injuries are, to the best of the claimant's knowledge, as follows: Name: Name: Address: Address: Name: Name: Address: Address: Hospital Lien Prepared by: Nikisha Loftin UNIVERSITY OF ALABAMA HOSPITAL L450, 619 19th Street South Demalowo Birmingham, AL 35249 Duly Authorized Representative, UAB/PFS \_\_ a Notary Public in and for the County of Jefferson, State of Alabama, personally appeared, Bakbara Donahoo who being by me first duly sworn, doth depose and say that she is the authorized representative for the claimant, and as such has personal knowledge of the facts set forth in the foregoing statement of lien, and that the same are true and correct/ Subscribed and sworn to before me this Induation day of 2008.

NOTARY PUBLIC STATE OF ALAE

**Notary Public** 

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