

## 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: Allyson Brand of 3478 Highway 26, Columbiana, AL 35051, against all causes of action, suits, claims, counter claims and demands accruing to the said Allyson Brand or her legal representative, and against all judgments, settlements and settlement agreements entered into by virtue thereof and on account of

			ims, demands, judgments, settlements or
settlement agreements ar	nd which necessitate	d such hospital care.	
064478278 8267			
Amount Claimed	: \$19,569.00	Date of Admission:	09/23/2008
Date of Injury:	09/23/2008	Date of Discharge:	09/23/2008
	•	•	such injured person, or the legal njuries are, to the best of the claimant's
Name:		Name:	
Address:		Address:	
Name:		Name:	
Address:		Address:	
	By: XM/2/2 Duly Authorized Rer	ALABAMA HOSPITAL  Oresentative, UAB/PFS	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
foregoing statement of li Subscribed and sworn to		e are true and correct.  day of  day of	inclier), 2008.
		asella a. John	
	NOT	tary Public	

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

BONDED THRU NOTARY PUBLIC UNDERWRITERS