Shelby Cnty Judge of Probate, AL 05/06/2009 03:28:52 PM FILED/CERT

NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

LNB Ste 450, 619 19th 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 19th 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: Margaret Carmichael of 406 Cotton Gin Rd, Harpersville, AL 35078, against all causes of action, suits, claims, counter claims and demands accruing to the said Margaret Carmichael 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.

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Amount Claimed	: \$26,150.65	Date of Admission:	04/29/2009
Date of Injury:	04/29/2009	Date of Discharge:	04/30/2009
	*	•	such injured person, or the legal njuries are, to the best of the claimant's
Name:		Name:	
Address:		Address:	
Name:		Name:	
Address:		Address:	
	Duly Authorized Rep	ALABAMA HOSPITAL resentative, UAB/PFS	Diffillingham, AL 33249
Alabama, personally app	ntative for the claimaen, and that the same before me this	ahoo who being by me first nt, and as such has personal are true and correct. day of May	r the County of Jefferson, State of duly sworn, doth depose and say that she knowledge of the facts set forth in the, 2009.
		Molin D. Cases	
	My C	Commission Expires	· · · · · · · · · · · · · · · · · · ·