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 Shelby Cnty Judge of Probate, AL
 01/04/2010 10:58:31 AM 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: Perry Oneal Cox of P.O.Box 276, Alexander City, AL 35011, against all causes of action, suits, claims, counter claims and demands accruing to the said Perry Oneal Cox or his 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.

064595147.9361

Amount Claimed: \$31,898.70 Date of Admission: 12/27/2009
 Date of Injury: 12/27/2009 Date of Discharge: 12/29/2009

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: <u>State Farm Insurance</u>	Name: _____
<u>P.O.Box 830852</u>	_____
Address: <u>Birmingham, Al 35283</u>	Address: _____
_____	_____
Name: _____	Name: _____
_____	_____
Address: _____	Address: _____
_____	_____

UNIVERSITY OF ALABAMA HOSPITAL
 By: [Signature]
 Duly Authorized Representative, UAB/PFS

Hospital Lien Prepared by: Colundra McLeod
 L450, 619 19th Street South
 Birmingham, AL 35249

Before me, Shelia D. Lanier a Notary Public in and for the County of Jefferson, State of Alabama, personally appeared, **Lee Hawker** 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 31st day of DECEMBER, 2009.

Shelia D. Lanier
 Notary Public

NOTARY PUBLIC STATE OF ALABAMA
 MY COMMISSION EXPIRES FEBRUARY 28, 2011
 I HAVE THIS NOTICE FILED IN THE PUBLIC RECORDS

4844