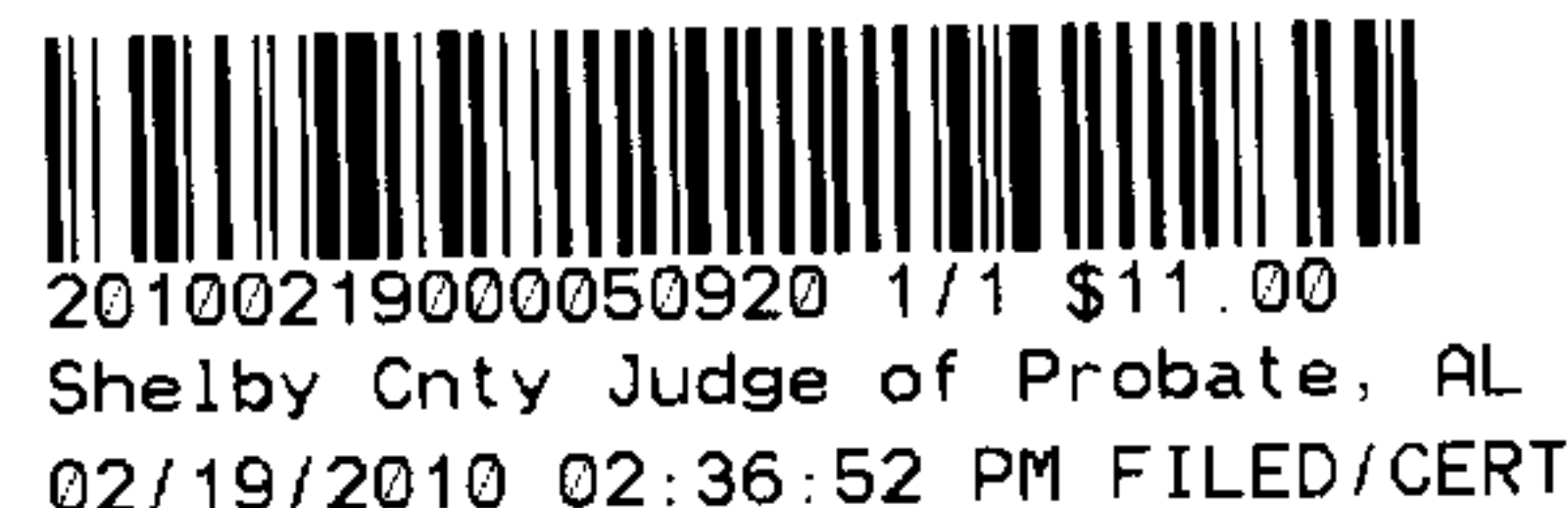


**.NOTICE OF HOSPITAL LIEN**  
**UNIVERSITY OF ALABAMA HOSPITAL**  
LNB Ste 450, 619 19<sup>th</sup> ST. S., Birmingham, AL 35249-6510  
1-888-309-8435 or 934-6405



**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: Jill Wallace of 1895 Porto Bello Rd, Birmingham, AL 35242, against all causes of action, suits, claims, counter claims and demands accruing to the said Jill Wallace 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.

064605866.0039

Amount Claimed: \$38,000.29

Date of Admission: 02/09/2010

Date of Injury: 02/09/2010

Date of Discharge: 02/11/2010

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: Farmers Insurance  
P.O.Box 268993

Address: Oklahoma City, OK 73126  
Clm#1015480186

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

**UNIVERSITY OF ALABAMA HOSPITAL**

By: [Signature]

Duly Authorized Representative, UAB/PFS

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

Before me, Colundra McLeod 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 15<sup>th</sup> day of February, 2010.

Colundra McLeod  
Notary Public

4919