

NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

JT Ste 720, 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, JT 720, 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: Leona Weir of 1218 2nd Ave SW, Alabaster, AL 35007, against all causes of action, suits, claims, counter claims and demands accruing to the said Leona Weir 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.

061158259.0127

Amount Claimed:	\$41,208.67	Date of Admission:	05/10/2010
Date of Injury:	05/10/2010	Date of Discharge:	05/11010
	•	-	such injured person, or the legal njuries are, to the best of the claimant's
Name:		Name:	
Address:		Address:	
Name:		Name:	
Address:		Address:	
Before me, <u>Number</u> Alabama, personally appea	ared, Gail Tarver where the claimant, and and that the same and efforce me this	A Notary Public in and forms of the last of the last such has personal knowns.	

NOTARY PUBLIC STATE OF ALABAMA AT LARGE MY COMMISSION EXPIRES: Dec 21, 2013
BONDED THRU NOTARY PUBLIC UNDERWRITERS

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