

## NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

JT Ste 720, 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, 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: Hope Carter of 112 Mockingbird Dr, Columbiana, AL 35051, against all causes of action, suits, claims, counter claims and demands accruing to the said Hope Carter 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

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settlement agreements and	which necessitate	d such hospital care.	
064638632.0160			
Amount Claimed:	\$206,329.45	Date of Admission:	06/09/2010
Date of Injury:	06/09/2010	Date of Discharge:	06/23/2010
	<b>A</b>	· · · · · · · · · · · · · · · · · · ·	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>OUM</u> Alabama, personally appeauthorized representative	uly Authorized Repart of Lee Hawker for the claimant, and	who being by me first duly	Hospital Lien Prepared by:Colundra McLeo JT 720, 619 19 <sup>th</sup> Street South Birmingham, AL 35249  or the County of Jefferson, State of sworn, doth depose and say that she is the ledge of the facts set forth in the , 2010.
		ary Public 4000	Qd
		AENE DUO OTA-	
		178 4 1 P . 1 171 (17) (17) (18) (18)	

AFIY FUNLIC STATE OF ALABAMA AT LARGE MY COMMISSION EXPIRES: Dec 21, 2013 SCANDED THENU NOTARY PUBLIC UNDERWRITERIG