


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


20101217000425330 1/1 \$12.00
Shelby Cnty Judge of Probate, AL
12/17/2010 03:54:18 PM FILED/CERT

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: Walter Martin of 452 Waterford Dr, Calera, AL 35040, against all causes of action, suits, claims, counter claims and demands accruing to the said Walter Martin 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.

064037434.0347

Amount Claimed: \$15,730.90

Date of Admission: 12/10/2010

Date of Injury: 12/10/2010

Date of Discharge: 12/10/2010

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: Allstate Insurance

Name: _____

P.O.Box 440519

Address: Kennesaw Ga 30160

Address: _____

Name: _____

Name: _____

Address: _____

Address: _____

UNIVERSITY OF ALABAMA HOSPITAL

By: 

Duly Authorized Representative, UAB/PFS

Hospital Lien Prepared by: Colundra McLeod

JT 720, 619 19th Street South

Birmingham, AL 35249

Before me, Colundra McLeod a Notary Public in and for the County of Jefferson, State of Alabama, personally appeared, Gail Tarver 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 14th day of December, 2010.

Colundra McLeod

Notary Public

NOTARY PUBLIC STATE OF ALABAMA
MY COMMISSION EXPIRES: Dec 21, 2012
RECEIVED THRU NOTARY PUBLIC UNDERWRITER

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