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

20110718000208110 1/1 \$12.00 Shelby Cnty Judge of Probate, AL 07/18/2011 11:16:10 AM FILED/CERT

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: Ashley Moates of 8065 Hwy 51, Sterrett, AL 35147, against all causes of action, suits, claims, counter claims and demands accruing to the said Ashley Moates or his/hers 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.

064747088.1190

Amount Claime	d: \$17,150.00	Date of Admission:	07/09/2011
Date of Injury:	07/09/2011	Date of Discharge:	07/10/2011
	erson, to be liable for		such injured person, or the legal injuries are, to the best of the claimant's
Name:		Name:	· · · · · · · · · · · · · · · · · · ·
Address:		Address:	
Name:		Name:	
Address:		Address:	······································
Before me, MMA Alabama, personally ap the authorized represen	Duly Authorized Reproperties of the claimant, and that the same to before me this	a Notary Public in and for seasons who being by me first dul	, 2011.

Notary Public

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