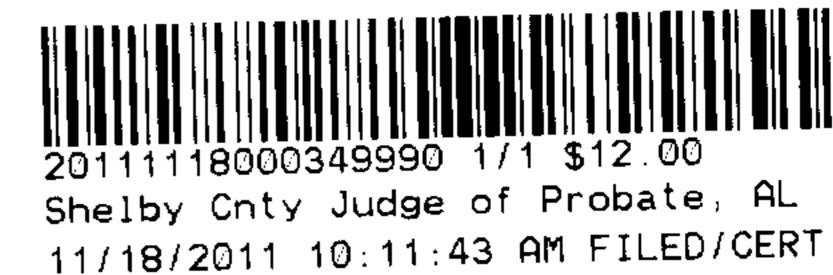
NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL



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: Kenneth Huffstutler of 1012 Iowa Ave, Thorsby, AL 35171, against all causes of action, suits, claims, counter claims and demands accruing to the said Kenneth Huffstutler 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.

064779508.1308 Date of Admission: 11/05/2011 Amount Claimed: \$135,380.36 11/13/2011 Date of Discharge: 11/04/2011 Date of Injury: 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: State Farm Insurance Name: P.O.Box 830852 Birmingham AL 35283 Address: Address: Name: Name: Address: Address: Hospital Lien Prepared by: Colundra McLeod UNIVERSITY OF ALAMA HOSPITAL

Address:

Address:

Address:

UNIVERSITY OF ALABAMA HOSPITAL
By:
Duly Authorized Representative, UAB/PFS

Before me, Manual Manu

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