

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: Larry Cottingham of 34 Oakdale Dr, Montevallo, AL 35115, against all causes of action, suits, claims, counter claims and demands accruing to the said Larry Cottingham or his/hers legal representative, and against all judgments, settlements and settlement agreements entered into by virtue thereof and

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on account	t of such injuries	giving rise to suc	ch causes of action, suits, clair	ns, counter claims, demands, judgments,
settlement	s or settlement a	greements and wh	hich necessitated such hospital	care.
064810789	9.2069			
Amount Claimed:		\$172,584.01	Date of Admission:	03/10/2012
Date of Injury:		03/09/2012	Date of Discharge:	03/21/2012
representa	s and addresses of tive of such pers e, as follows:	of all persons, firm son, to be liable for	ns or corporations claimed by or damages arising from such i	such injured person, or the legal injuries are, to the best of the claimant's
Name:	Allstate Insurance		Name:	
	P.O.Box 440519			
Address:	Kennesaw GA 3	0160	Address:	
Name:			Name:	
Address:			Address:	
	T	1 A Al 1 T	F ALABAMA HOSPITAL epresentative, UAB/PFS	Hospital Lien Prepared by:Colundra McLeod JT 720, 619 19 th Street South Birmingham, AL 35249
Alabama, is the auth	personally appe orized represent	ative for the clain	mes who being by me first dult nant, and as such has personal	or the County of Jefferson, State of ly sworn, doth depose and say that she/he knowledge of the facts set forth in the
foregoing Subscribe	statement of lies d and sworn to b	n, and that the san before me this	ne are true and correct///////////////////////////////////	<u></u>
			otary Public	

THAT FURTE STATE OF ALADAMANT DAME.

WY CLAMISSION EXPIRES: Dec 31, 2010 SANDED THRU NOTARY PUBLIC UNDERWATTERS