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

02/04/2013 01:06:33 PM 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: Jerry Waythan Easterling of 1538 7th Street, Alexander City, AL 35010 against all causes of action, suits, claims, counter claims and demands accruing to the said: Jerry Waythan Easterling 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. 064887258-2365

Amount Claimed: \$249,033.9	Date of Admission:	12/30/2012
Date of Injury: 12/30/201	Date of Discharge:	01/22/2013
The names and addresses of all person epresentative of such person, to be liaknowledge, as follows:	s, firms or corporations claimed by able for damages arising from such in	such injured person, or the legal njuries are, to the best of the claimant's
Name:	Name:	
Address:	Address:	
Name:	Name:	
Address:	Address:	
Duly Authorize Before me, MM MM Alabama, personally appeared, Thom	as Elmes who being by me first duly claimant, and as such has personal	y sworn, doth depose and say that she/he knowledge of the facts set forth in the
20130204000047560 1/1 \$12.00 20130204000047560 1/1 \$12.00 Shelby Cnty Judge of Probate, AL	Notary Public NOTARY PUBLIC STATE OF ALABAMA A MY COMMISSION EXPIRES: Dec 2	ATLARGE

MY COMMISSION EXPIRES: Dec 21, 2013

BONDED THRU NOTARY PUBLIC UNDERWRITERS