## NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

POB 308, 619 19<sup>th</sup> ST. S., Birmingham, AL 35249-6510 1-888-309-8435 or 205-934-6400

## 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 POB 308, 619 19<sup>th</sup> 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: Austin Turner of PO Box 370, Odenville, Alabama 35120 against all causes of action, suits, claims, counter claims and demands accruing to the said Austin Turner or his 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.

065112631-5118

Amount Claimed: \$90,882.95	Date of Admission: 04/28/2015
Date of Injury: 04/28/2015	Date of Discharge: 05/01/2015
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:	Name:
Address:	Address:
Name:	Name:
Address:	Address:
UNIVERSITY OF ALABAMA HOSPITAL  By:  Daly Authorized Representative, UAB/PFS  Before me.  Alabama, personally appeared, Columdra McLeod  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  Notary Public  Notary Public STATE OF ALABAMA AT LARGE  NOTARY	