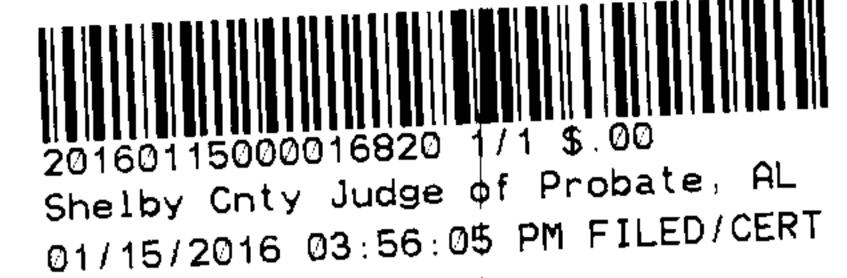
## NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

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

## THIS IS NOT A BILL



Date of Admission:

12/21/2015

## 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: Ricardo Cruz of 477 Forest Lakes Drive, Sterrett, Alabama 35147 against all causes of action, suits, claims, counter claims and demands accruing to the said Ricardo Cruz 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.

065192438-5355

Amount Claimed:

\$44,804.84

Date of Ir	ijury: 12/21/2015		Date of Discharge:	12/23/2015	
	ich person, to be liable	rms or corporations claimed for damages arising from so		<del>-</del>	
Name:		Name:			
Address:		Address:		<del></del>	
	UNIVERSITY C By: Duly Authorized J	OF ALABAMIA HOSPITA Pepresentative, UAB/PFS	Hospital Lien Pre POB 308, 61 Birming	Hospital Lien Prepared by: Brandy Lewis POB 308, 619 19 <sup>th</sup> Street South Birmingham, AL 35249	
Alabama, personall the authorized reproforegoing statements	y appeared, Thomas E esentative for the claim t of lien, and that the sa	VIS a Notary Public in a lines, who being by me first ant, and as such has person ame are true and correct.  28+11 day of Dec	and for the County of Jeffe st duly sworn, doth depose al knowledge of the facts	e and say that he is set forth in the	
Subscribed and swe		bandy Nicolotary Public		L <b>J</b> .	

