20161028000396820 1/1 $.00
Shelby Cnty Judge of Probate, AL
10/28/2016 11:21:18 AM FILED/CERT

Probate Judge of Shelby County, Alabama

NOTICE OF HOSPITAL LIEN

Under the provisions of Ala. Code 1975, §35-11-370, et seq., notice is hereby given that Mobile Infirmary, whose address is 5 Mobile Infirmary Cir., Mobile 36607 operated by Infirmary Health, 5 Mobile Infirmary Circle, Mobile, Alabama 36607, claims a lien for all reasonable charges for hospital care, treatment and maintenance necessitated by injuries received by:

Name and address of patient as it appears on records of hospital:
Samuel Jones
2705 Elsmore St
Mobile, AL 36607

Total Amount Due: $2,349.62

Date of Admission	Date of Discharge	Account No	Amount Due
08/18/2016	08/18/2016	MMI6030898976231	$2,349.62

To the best of the claimant's knowledge, the names and addresses of all persons, firms or corporations claimed by said injured person, or legal representative of said person, to be liable for damages arising from such injuries are as follows:

Alexander Shunnarah
Shunnarah Law Office - Mobile
PO Box 1388
Mobile, AL 36633

BY: Margeret Barnes
Margeret Barnes, Authorized Agent

STATE OF MISSISSIPPI
COUNTY OF HINDS

The foregoing statement was acknowledged and verified before me this 25 day of October, 2016, by Margeret Barnes, the duly authorized agent/operator of the above named health care provider for and on behalf of said hospital.

Bailie Williams
NOTARY PUBLIC

STATE OF MISSISSIPPI NOTARY PUBLIC ID = 110478 BAILIE WILLIAMS Commission Expires Oct. 14, 2018 RANKIN COUNTY

MY COMMISSION EXPIRES: _____

THIS INSTRUMENT PREPARED BY:

Kimberly L. Guthrie (LAW041)
RevClaims, LLC
P.O. Box 12535
Jackson, MS 39236-2535