NOTICE OF HOSPITAL LIEN UNIVERSITY OF ALABAMA HOSPITAL

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

THIS IS NOT A BILL

20180129000030010 1/1 \$.00 Shelby Cnty Judge of Probate: AL 01/29/2018 01:53:32 PM FILED/CERT

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 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: Taz Matthew Beatley of 5005 Oak Leaf Cir, Adamsville, AL 35005 against all causes of action, suits, claims, counter claims and demands accruing to the said Taz Matthew Beatley or his/ her 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.

065506628.8008			
Amount Claimed:	\$261,457.84	Date of Admission:	01/08/18
Date of Injury:	01/08/18	Date of Discharge:	01/19/18
		rporations claimed by such injuges arising from such injuries ar	
Name:		Name:	<u> </u>
Address:		Address:	<u> </u>
Before me, Shello To Alabama, personally appeared, she is the authorized representa- the foregoing statement of lien, Subscribed and sworn to before	By: Outhorized Duly Authorized A Columbra McLeod tive for the claimant and that the same as me this A H	Notary Public in and for the Co, who being by me first duly switch, and as such has personal known true and correct. Iday of	orn, doth depose and say that ledge of the facts set forth in 2018.

Hospital Lien Prepared by: Marco Passarello Patient Financial Services AVBC 720 39th St N Birmingham, AL 35222-1112

