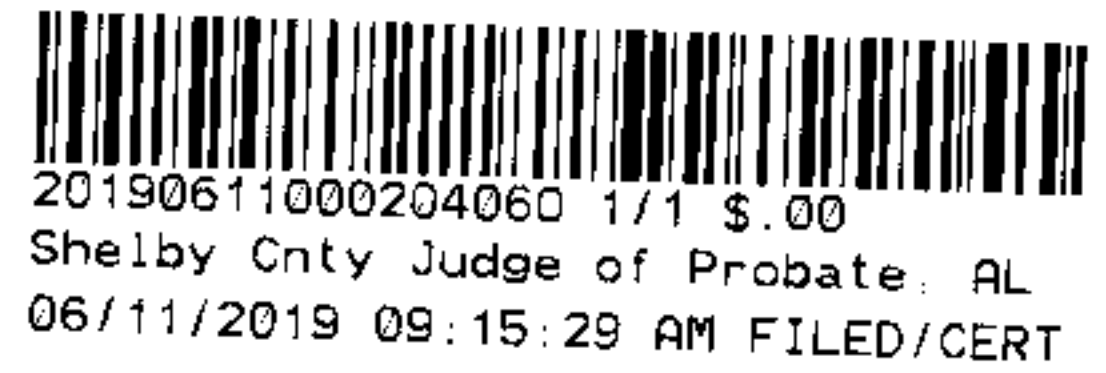


NOTICE OF HOSPITAL LIEN



STATE OF ALABAMA

COUNTY OF SHELBY

Under the provisions of Title 35, Chapter 11, Division 15, Code of Alabama, 1975, notice is hereby given that the UNIVERSITY OF SOUTH ALABAMA, by and through its division USA HEALTH, UNIVERSITY HOSPITAL a public body corporate, whose address is 2451 Fillingim Street, Suite 3040, Mobile, Alabama, 36617, claims a lien for all reasonable charges for hospital care, treatment and maintenance necessitated by injuries received by:

Addison Alexander
(NAME OF INJURED PERSON)

208 Willow Lake Circle, Wilsonville, AL 35186
(ADDRESS)

University of South Alabama Children's and Women's Hospital, 1700 Center Street, Mobile Alabama 36604
(TREATING FACILITY)

DATE OF INJURY: 5/27/2019 DATE OF ADMISSION: 5/27/2019

DATE OF DISCHARGE: 5/28/2019 TOTAL CHARGES: \$1,750.50

Upon any and all actions, claims, counterclaims and demands accruing to said injured person or accruing to the legal representative of said injured person, and upon all judgments, settlements and settlement agreements entered into by virtue thereof on account of injuries giving rise to such actions, claims, counterclaims, demands, judgments, settlements or settlement agreements and which necessitated such hospital care.

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

BCBSOH, P.O. Box 105187, Atlanta, GA 303485187

Burn Account No: 1200880112

UNIVERSITY OF SOUTH ALABAMA, by and through its division USA HEALTH, UNIVERSITY HOSPITAL
a public body corporate, Claimant

BY: Susa M. Englestead
Its Agent

STATE OF ALABAMA
COUNTY OF MOBILE

Personally appeared before me, the undersigned authority in and for said County in said State, Teresa M. Englestead, who is known to me and who, being first by me duly sworn, on oath, deposes and says that she is Agent for the claimant and that she is informed and believes and on such information and belief she avers that the facts set out in the foregoing Notice of Hospital Lien are true and correct as therein set out.

Susa M. Englestead
AFFDANT

Subscribed and sworn to before me on this 5th day of June, 2019.

Patricia Chavers
NOTARY PUBLIC

My Commission Expires 04/27/2020

Prepared By Jessica Ulmer
P. O. Box 40010
Mobile, Alabama 36640