PREPARED BY:
ASPIRION HEALTH RESOURCES
KYLE S. FISCHER
P.O. BOX 1437
COLUMBUS, GA 31902-1437
(706) 660-5507

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Shelby Cnty Judge of Probate, AL
09/03/2019 03:24:16 PM FILED/CERT

HOSPITAL LIEN

STATE OF ALABAMA: COUNTY OF SHELBY:

TO THE PROBATE COURT AND CLERK OF PROBATE COURT OF SAID COUNTY:
Notice is hereby given to all persons, firms and corporations, including

REF #: BMCE401644
ESTHER J MCMILLAN
25 COUNTY ROAD 569
VERBENA, AL 36091-4308

CLAIMS MANAGEMENT INCORPORATED
ATTENTION: ASHLEY CARTER
PO BOX 14731
LEXINGTON, KY 40512-4731
CLAIM NUMBER: 8886008

MONTGOMERY PONDER, LLC
ATTENTION: WHITT MCLEOD
2226 1ST AVE S STE 105
BIRMINGHAM, AL 35233-2334

that Baptist Medical Center East, 400 Taylor Road, Montgomery, AL 36117, operated by The Health Care Authority for Baptist Health, An Affiliate of UAB Health System, P.O. Box 241708, Montgomery, AL 36124-1708 has treated as a patient ESTHER J MCMILLAN who resides at 25 COUNTY ROAD 569, VERBENA, AL 36091-4308 and who was admitted for treatment at Baptist Medical Center East, 400 Taylor Road, Montgomery, AL 36117 on 07/22/2019 and discharged on 07/22/2019 and said patient incurred charges in the amount of $1,495.20 for hospital care and treatment. Baptist Medical Center East hereby creates a lien up to the maximum allowable amount of any obtained or recovered damages which the patient or his/her legal representative may receive or be entitled to receive, whether by judgment, settlement, or compromise, from any and all causes of action, suits, claims, counterclaims or demands accruing to the patient, all in accord with the provisions of Code of ALA. § 35-11-370 et. seq. The above named persons, firms or corporations, if any, are claimed by the patient or his legal representative to be liable for said injuries and such persons, firms or corporations are so listed to the best of claimant's knowledge. This lien is for the amount being claimed is fair and reasonable for the services rendered.

STATE OF GEORGIA: COUNTY OF MUSCOGEE:

Personally appeared before the undersigned attesting officer, duly authorized by law to administer oaths, the undersigned, who on oath, deposes and says that he is authorized to make this affidavit on behalf of Baptist Medical Center East and the statements contained in the above and foregoing lien are true to the best of his knowledge and belief.

Baptist Medical Center East

By: _____
Kyle S. Fischer, General Counsel

Sworn to and subscribed before me
This 29th day of August, 2019

_____
Notary Public

TERESE E WINTERS
NOTARY PUBLIC
MY COMMISSION EXPIRES
JANUARY 31, 2022
MARION COUNTY, GEORGIA