TO: Shelby County Probate Office

P.O. Box 825

Columbiana, AL 35051



20220517000200150 1/1 \$.00 Shelby Cnty Judge of Probate, AL 05/17/2022 10:25:48 AM FILED/CERT

## NOTICE OF HOSPITAL LIEN

Pursuant to Alabama Code 1975, § 35-11-370 et seq., notice is hereby given that Baptist Health System, Inc. is entitled to a lien for the reasonable charges for hospital care, treatment and maintenance of Shaterika Simon.

In order to perfect said lien, Baptist Health System, Inc. submits the following information:

Name of Patient:

Address of Patient:

PO Box 1532

Columbiana, AL 35051

Name of Hospital/Operator Thereof: Baptist Health System, Inc.

Address of Hospital/Operator Thereof: 1000 1st Street North

Alabaster, AL 35007

Date of Admission: 10/24/2021
Date of Discharge: 10/24/2021
Amount Due: 2.575.00

To the best of the claimant's knowledge, the following is/are the name(s) and address(es) of the persons, firms or corporations claimed by the above named ill or injured person or by such person's legal representative, to be liable for damages arising from such illness or injuries:

Shaterika Simon - PO Box 1532 Columbiana, AL 35051

3,575.00

This lien shall be enforced upon all claims accruing to Shaterika Simon and his/her legal representative(s) in connection with the injuries which necessitated the subject hospital care, treatment and maintenance. The Patient's legal representative(s) if known, is/are as follows:

**Kevin Barnes** 

Alexander Shunnarah Personal Injury Attorneys

1100 23rd Street South Birmingham, AL 35205

By:

ID # 100351

STEPHANIE WIGGINS .

Courtney B. Smith, Esq. (2987N58S)

Authorized Agent for Shelby Baptist Medical Center

FOR INQUIRIES CALL (855) 283-2887

State of Mississippi

Prepared by:

Courtney B. Smith, Esq.

514 East Waldron Street

Corinth, MS 38834

County of Lowndes

The foregoing statement was acknowledged and verified before me this Tuesday, May 10, 2022, by Courtney B. Smith, Esq., the duly authorized agent of the above named health care provider for and on behalf of said hospital.

My commission expires:

NOTARY PUBLIC