

# Unofficial Document

WHEN RECORDED, MAIL TO:

Excel Surgical Center, LLC  
6424 E Broadway Rd Ste 102  
Mesa, AZ 85206

20.

Yo.

## NOTICE AND CLAIM OF MEDICAL LIEN

Name and address of Claimant/Licensed Health Care Provider:

Excel Surgical, LLC  
6424 E Broadway Rd Ste 102  
Mesa, AZ 85206

Name and address of patient: DONALD PERRY  
1027 W. PALO VERDE ST.  
GILBERT, AZ 85233

Date of injury: JULY 08, 2022

County & State where injury occurred: Maricopa County, Arizona

Dates of service received by patient: NOVEMBER 11, 2025 - PENDING

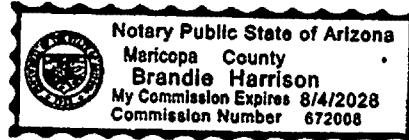
Amount due for care of patient: \$1,200.00 - PENDING

To the best of my claimant's knowledge, the names & address of all persons firm or corporations & insurance carriers of said persons, firm or corporations claimed by the above patient, or by his legal representative, to be liable for damages are as follow:

NAME	ADDRESS
DONALD PERRY	1027 W. PALO VERDE ST, GILBERT, AZ 85233
VRANA LAW	2147 E. BASELINE RD., TEMPE, AZ 85283

Pursuant to A.R.S 33-931, the above named claimant, personally or through its authorized agent, does hereby claim a lien upon any & all actions, suits, claims, counterclaims or demands for damages accruing to said patient on his behalf by a legal representative, assignee or heirs on account of injuries giving rise to such a cause of action, & which necessitated medical care & treatment for which claimant rendered such care at the rate customarily charged for such services which exceed \$250.00 as provided under A.R.S. 33-931 (B), the sum of which is due & payable as indicated above.

STATE OF ARIZONA )  
COUNTY OF MARICOPA )  
 ) SS.  
 )



I, Josh Shelley, being sworn upon oath, deposes & says: (1) I am named as claimant or authorized agent of claimant, (2) I have made this Notice & claim of Medical lien in good faith, (3) the facts herein stated are true & correct to the best of my knowledge.

By: J. C. Shelley For Excel Surgical Center.

SUBSCRIBED AND SWORN to before me, the undersigned Notary Public, this 210 day of November  
2025 by, Brandie Harrison.

MY COMMISSION EXPIRES 8/4/2028

NOTARY PUBLIC