

# Unofficial 20 Document

When recorded mail to:

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dr.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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City/State/Zip: \_\_\_\_\_

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this area reserved for county recorder

*CAPTION HEADING:*

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This is part of the official document.

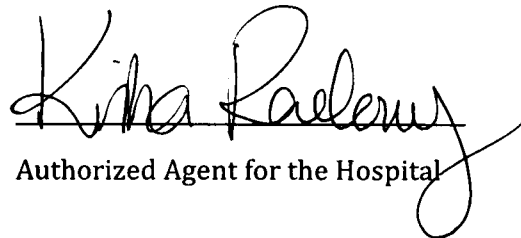
**RELEASE OF HOSPITAL LIEN****ARIZONA REVISED STATUTES SECTIONS 33-936**

1. The undersigned hereby gives notice for and on behalf of Tenet Health (hereinafter "Hospital") maintains a lien pursuant to A.R.S. § 33-931 that was recorded in this Court on 02/21/2025 at 20250095370 on page the charges incurred by patient Adriana Rodriguez, for medical or other services performed by the Hospital. Such lien is upon a cause of action or claim of the injured individual for any damages recovered, or to be recovered, by the patient, or by his or her heirs or personal representative, on account of the injuries that the patient sustained in and/or by a motor vehicle or other liability accident.
2. The Hospital, owner of the debt, obligation and lien, through its authorized agent, hereby releases the lien and authorizes the Clerk of this Court to accept this certificate as release of the lien and to record such entry of the same.

Farm Bureau, Claim # B108128P00, PO Box 9168 Des Moines, IA 50306  
Tortfeasor: Unknown

Unofficial Document

By:

  
Authorized Agent for the Hospital