

# Unofficial Document

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## CAPTION HEADING:

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## **NOTICE OF CLAIM OF LIEN FOR MEDICAL SERVICES**

#### **Unknown to Claimant**

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**Tortfeasor**

NOTICE IS HEREBY GIVEN, pursuant to The Arizona Property Code, Title 33, Chapter 7, Article 3, "Hospital and Emergency Medical Services Liens," that the above referenced Claimant has performed emergency medical services for the patient listed above and now files this Notice of Claim of Lien for unpaid fees related to that care. The pertinent information as required under Chapter 7 is as follows:

Claimant: Phoenix ER, & PHOENIX PHYSICIAN GROUP, PLLC  
Address of Service: 3050 S Dobson Rd  
Chandler, AZ 85248  
Patient: NOONAN, AVIANNA H PHER27286\_1  
Unofficial Document  
Last Known Address: 3800 S CANTABRIA CIR 1069  
Chandler, AZ 85248  
Place of Injury: Unknown  
Date of Injury: 08/26/2025 Charges: \$ 5,368.64  
Fault of: Unknown to Claimant, Tortfeasor, whose address is unknown

The Claimant claims a hospital lien for the value of Claimant's said emergency services, which were rendered as necessary by Phoenix ER, & PHOENIX PHYSICIAN GROUP, PLLC Claimant for the medical services to said Patient to wit: Patient received medical treatment.

By: Keelyn Marlatt  
Keelyn Marlatt  
Director of Revenue Cycle

STATE OF TEXAS  
COUNTY OF: Harris

On this date, personally appeared before me, the undersigned person, Keelyn Marlatt, the agent for Phoenix ER, and & PHOENIX PHYSICIAN GROUP, PLLC on oath first duly sworn, stated that she has read the foregoing, is aware of the contents thereof, and believes the same to be just and the facts stated herein as true and correct.

SIGNED and sworn to before me this 15 day of

Notary Public in and for the State of Texas

My commission Expires: 8/7/25

**Return file stamped copy to:  
6030 S Rice Ave STE C  
Houston, TX 77081**

