

# Unofficial Document

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STATE OF ARIZONA )  
ss Notice and Claim of Health Care provider Lien  
Maricopa County )

NAME AND ADDRESS OF PATIENT:                   NAME AND ADDRESS OF CLINIC:  
Pedro Aragon                                       CENTRAL MESA MEDICAL  
225 N Gilbert Rd Apt 269                       204 N CENTER ST  
Mesa, AZ 85203                                   MESA, AZ 85201

COUNTY AND LOCATION WHERE INJURIES OCCURRED:  
Maricopa County in Mesa

DATE INJURIES OCCURRED: October 8, 2025

DATE(S) OF SERVICE: October 17, 2025 & ongoing until Discharged

AMOUNT DUE FOR SERVICES: \$2,304.00 To Date and Accruing

To the best of claimant's knowledge, the names and addresses of all persons, firms, corporations and insurance carriers claimed by the above named patient or by his legal representative to be liable for damages are as follows:

NAME, ADDRESS, CLAIM# AND ADJUSTER OF LIABILITY CARRIER(S):  
USAA - Auto Injury Solutions                   Claim#:022312490-809  
PO BOX 26001  
Daphne, Al 36526

Pursuant to A.R.S. 33-931, the above named claimant, personally or through its authorized agent, does hereby CLAIM A LIEN upon any and all actions, suits, claims, counter claims or demands for damages accruing to said patient on his/her behalf by a legal representative, assignee or heirs on account of injuries giving rise to such cause of action, and which necessitated his or her medical care and treatment for which claimant rendered medical 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 and payable as indicated above.

I, Scott Miritello, being first duly sworn upon oath, depose and say: (1) That I am the person herein named as claimant (or the authorized agent of such claimant); (2) That I have made this Notice of Claim of Medical Lien in good faith; and (3) That the facts herein stated are true and correct to the best of my knowledge, information and belief.



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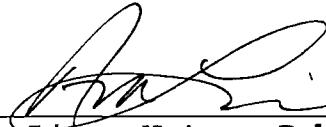
Claimant or Agent

This instrument was acknowledged before me this 14<sup>th</sup> day of November, 2025 by Scott Miritello, duly appointed agent for Central Mesa Medical.



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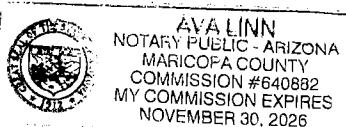
Scott Miritello, Agent



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Ava Linn, Notary Public

**My Commission Expires:**



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