NOTICE OF AMENDED PHYSICIAN'S LIEN

To the County Clerk of Tulsa, Oklahoma; pursuant to Okla. Stat. tit. 42 § 46, please enter this lien on the Mechanics and Materialman's lien docket. This lien concerns amounts due to Physician for services rendered to below named patient relating to injuries sustained by patient arising from an accident that occured on 2009-12-26. This lier is not being asserted against any real property owned by Patient, but rather Physician hereby places the following parties on notice that this lien is being asserted against any recovery or sum had or collected or to be collected by said patient, their heirs, personal representatives, or their estate, whether Patient's remedy for said accident is made by settlement, compromise, judgement or court award.

ED PHYSICIAN'S LIEN		For Courts Use Only
Ahoma; pursuant to Okla. Stat. tit. 42 Mechanics and Materialman's lien ints due to Physician for services relating to injuries sustained by at occured on 2009-12-26. This lien real property owned by Patient, but following parties on notice that this covery or sum had or collected or to heirs, personal representatives, or nedy for said accident is made by a or court award.		
X Attached 1	oill is not final lien. An	amended lien to follow.
☐ Attached l	oill is the final lien.	
X This lien a	mmends lien no. L20090	002679, because: Amending Amount
Patient's Insurer:		Policy or Claim no.:
None		A 33: 4
,		Adjuster:
Defendant's	Insurer:	Policy or Claim no.:
Farmers Insurance Group		#101324574-1-3
PO Box 268994		Adjuster:
Okla. City, OK 73126-8994		John Sukovaty
Other Party's Insurer: None		Policy or Claim no.:
None		Adjuster:
,		
13	ramy Jarman 15 N Shartel klahomacity, Ok 73103	
DC	Make Checks Payable	e To: Cate Chiropractic Center
Suite 103	Tax ID Number:	73-1443096
TANK	Telephone Number:	(918) 24 7-2225
207044	Physician Signature:	()
COUNTY	-	<u> </u>

Physician:

Address:

Thomas E. Cate, DC

2828 E 51st

Tulsa, O

State of Oklahoma) County of Tulsa)

Lien Amount \$2990.0

8404 N 136th E ave #204

Other Responsible Party:

Patients Attorney (If Known):

Patient:

Brian Worrell

Defendant:

Vance Mims

Owasso, Ok 74055

Before me, a Notary P County and State, personally appeared the above Physician, Known to be the same and identical operation ed of his own free act and accord and for the uses and purposes therein set forth. In witness the Thave affixed my hand and official seal on the day of line, 20 0

My commission no. 06007044 expires on 2010-07-17

Notary Public