

NOTICE OF PHYSICIAN'S LIEN

For Courts Use Only

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 occurred on 2009-05-09. This lien 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.

☒ Attached bill is **not** final lien. An amended lien to follow.

Lien Amount \$455.0

☐ Attached bill is the final lien.

☐ This lien amends lien no. , because:


Patient: Krystal Johnson 1620 S sycamore ave Broken Arrow, Ok 74012	Patient's Insurer: None	Policy or Claim no.: Adjuster:
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Defendant: Dallas Clark	Defendant's Insurer: UAI PO Box 3099 Oakbrook, IL 60522	Policy or Claim no.: #060000024 Adjuster: Victoria
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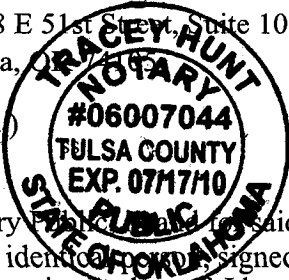
Other Responsible Party:	Other Party's Insurer: None	Policy or Claim no.: Adjuster:
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Patients Attorney (If Known): unknown

Physician: Thomas E. Cate, DC
Address: 2828 E 51st Street, Suite 103
Tulsa, Oklahoma 74112

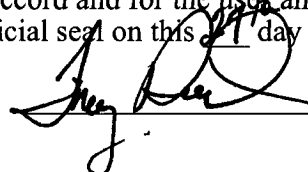
Make Checks Payable To: Cate Chiropractic Center
Tax ID Number: 73-1443096
Telephone Number: (918) 747-2225
Physician Signature: 

State of Oklahoma)
County of Tulsa)



Before me, a Notary Public for said County and State, personally appeared the above Physician, Known to be the same and identified to me, signed of his own free act and accord and for the uses and purposes therein set forth. In witness thereof, I have affixed my hand and official seal on this 24th day of May, 2009

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

 Notary Public