## NOTICE OF PHYSICIAN'S LIEN

		For Courts Use Only
lo, please enter this lien on the cket. This lien concerns amoundered to below named patient ient arising from an accident the not being asserted against any their Physician hereby places the name is being asserted against any recollected by said patient, their	ahoma; pursuant to Okla. Stat. tit. 42 Mechanics and Materialman's lien ints due to Physician for services t relating to injuries sustained by lat occured on 2011-05-12. This lien real property owned by Patient, but following parties on notice that this ecovery or sum had or collected or to r heirs, personal representatives, or nedy for said accident is made by t or court award.	
	X Attached bill is <b>not</b> final lien. An	amended lien to follow.
Lien Amount \$575.0	☐ Attached bill is the final lien.	
	☐ This lien ammends lien no. , becau	ase:
Patient: Aimee Gibson 3416 S 77th E ave apt#1266 Tulsa, Ok 74133	Patient's Insurer: Allstate Medpay PO Box 440519 Kennesaw, GA 30160	Policy or Claim no.: 0202636890 Adjuster: Tanessa dyson
Defendant:	Defendant's Insurer: None	Policy or Claim no.: Adjuster:
Other Responsible Party:	Other Party's Insurer: None	Policy or Claim no.: Adjuster:
Patients Attorney (If Known)	: unknown	
Physician: Thomas E. Cato. Address: 2828 E 515 CT	Tax ID Number:	le To: Cate Chiropractic Center 73-1443096 (918) 747-2225
State of Oklahoma )	Telephone Number: Physician Signature:	
County of Tulsa)  Selfore me, a Notary Public to be the same and identical Selfore.	Physician Signature: 007044 07/17/2014 and for any ounty and State, persona	ally appeared the above Physician, Known