

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 2010-10-05. 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 \$945.0

☐ Attached bill is the final lien.

☐ This lien amends lien no. , because:

Patient:	Patient's Insurer:	Policy or Claim no.:
Taylor Jackson 3732 E 48th Tulsa, Ok 74135	None ,	Adjuster:

Defendant:	Defendant's Insurer:	Policy or Claim no.:
Meagan Misner ,	Oklahoma Farm Bureau 3303 N Kickapoo Shawnee, Ok 74804	2010828201 Adjuster: Justin Holmes

Other Responsible Party:	Other Party's Insurer:	Policy or Claim no.:
Terry Jackson 3732 E 48th st Tulsa, Ok 74135	State Farm Ins. Co. PO Box 22101 Tulsa, OK 74121-2101	36700542 Adjuster:

Patients Attorney (If Known):	unknown ,
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Physician: Thomas E. Cate, DC
Address: 2828 E 51st Street, Suite 103
Tulsa, OK 74105

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) ss. _____

Before me, a Notary Public, in and for said County and State, personally appeared the above Physician, Known to be the same and identical person, 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 ____ day of _____, 20__

My commission no. 06007044 expires on 2010-07-17 _____ Notary Public