NOTICE OF PHYSICIAN'S LIEN

To § 4 doc reno pati is n rath lien be the sett

checket. This lien concerns amoundered to below named patient dient arising from an accident that the being asserted against any refer Physician hereby places the is being asserted against any recollected by said patient, their	shoma; pursuant to Okla. Stat. tit. 42 Mechanics and Materialman's lien and the state of the physician for services relating to injuries sustained by at occured on 2009-05-10. This lien eal property owned by Patient, but following parties on notice that this covery or sum had or collected or to heirs, personal representatives, or edy for said accident is made by or court award.	
	X Attached bill is not final lien. An	amended lien to follow.
Lien Amount \$965.0	☐ Attached bill is the final lien.	
	☐ This lien ammends lien no., becau	ise:
Patient:	Patient's Insurer:	Policy or Claim no.:
Karen Peterman	None	
19814 E 37th Pl		Adjuster:
Tulsa, Ok 74014	2	
Defendant:	Defendant's Insurer:	Policy or Claim no.:
	Oklahoma Farm Bureau	#2009815409
	10777 S Memorial Dr ste D	Adjuster:
,	Tulsa, OK 74133	Jane Kirk
Other Responsible Party:	Other Party's Insurer:	Policy or Claim no.:
	None	2 oney of Claim no
		Adjuster:
,	,	
Patients Attorney (If Known):	Robert Rode 400 S Boston ave ste Tulsa, Ok 74103	
	Make Checks Payabl Tax ID Number: Telephone Number: Physician Signature:	le To: Cate Chiropractic Center 73-1443096 (918) 747-2225
County of Tulsa)	07/17/10/ X	
Before me, a Notary Publicing	He Torsaid County and State, persona	Ily appeared the above Physician Known

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

For Courts Use Only