## NOTICE OF 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 2009-07-26. 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.

| For Courts Use Only |
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|  | X Attached l        | oill is <b>not</b> final lien.                      | An amended lien to follow.                       |  |  |
|--|---------------------|---|--|--|--|
| Lien Amount \$545.0  | _                   | Attached bill is the final lien.                    |  |  |  |
| ·  | _                   | mmends lien no., be                                 | ecause:  |  |  |
| Patient:   | Patient's In        | surer:  | Policy or Claim no.:                             |  |  |
| Alejandra Delgado<br>6024 S Sante Fe<br>Tulsa, Ok 74136            | None ,              |   | Adjuster:  |  |  |
| <b>Defendant:</b> Suzanne Owen                                     | PO Box 268          | urance Group  | Policy or Claim no.:<br>#1014433797<br>Adjuster: |  |  |
| Other Responsible Party:   | Other Party<br>None | y's Insurer:  | Policy or Claim no.: Adjuster:                   |  |  |
| ,  | ,                   |   | Aujustei.  |  |  |
| Patients Attorney (If Know   | 40                  | obert Rode<br>00 S Boston ave ste<br>ulsa, Ok 74103 |  |  |  |
| Physician: Thomas E. Cate, DC  Address: 2828 E 54st Geof, Full 103 |                     | Tax ID Number:                                      | yable To: Cate Chiropractic Center 73-1443096    |  |  |
| Tulsa, <b>200</b>  | 007044              | Telephone Numb Physician Signatu                    | • •  |  |  |

Before me, a Notary Notary Said County and State, personally appeared the above Physician, Known to be the same and identical personal signed of his own free act and accord and for the personal purposes therein set forth. In witness thereof, I have affixed my hand and official seal on this day of the personal purposes.

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

Notary Public