

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 2008-11-05. 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 \$2829.8

☐ Attached bill is the final lien.

☐ This lien amends lien no. , because:

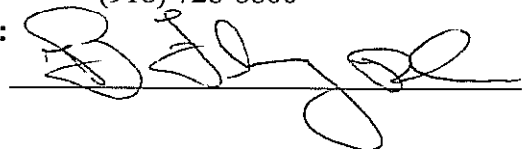
Patient: Brian Slack 6168 S. Madison Pl Unit #D Tulsa, OK 74136	Patient's Insurer: Allstate Insurance ,	Policy or Claim no.: Adjuster:
---	--	---

Defendant: Jill Cole ,	Defendant's Insurer: Allstate Insurance PO Box 26887 Okla. City, OK 73126	Policy or Claim no.: 122975253 Adjuster: Paula Bradsaw
-------------------------------------	---	---

Other Responsible Party: ,	Other Party's Insurer: None	Policy or Claim no.: Adjuster:
--------------------------------------	---------------------------------------	---

Patients Attorney (If Known): ,	unknown
---	---------

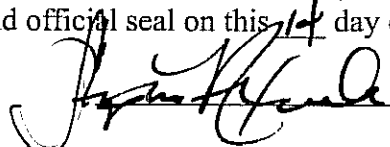
Physician: Brian Flournoy
Address: 3345 S. Harvard, Ste #101
Tulsa, OK 74135

Make Checks Payable To: brian flournoy
Tax ID Number: 731540956
Telephone Number: (918) 728-8800
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 14 day of 12, 2009

My commission no. 07001417 expires on 2011-02-09

 Notary Public