

NOTICE OF AMENDED 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 occurred on 2011-04-16. 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

Lien Amount \$1575.0

☒ Attached bill is **not** final lien. An amended lien to follow.

☐ Attached bill is the final lien.

☒ This lien amends lien no. L2011006613, because:

Patient: David Parenti 18441 Woodcrest Lane Catoosa, Ok 74015	Patient's Insurer: 21st Century PO Box 268993 Oklahoma City, Ok 73126	Policy or Claim no.: 1018452522-1-2 Adjuster: Ayzza Camacho
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Defendant: ,	Defendant's Insurer: None	Policy or Claim no.: Adjuster:
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Other Responsible Party: ,	Other Party's Insurer: None	Policy or Claim no.: Adjuster:
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Patients Attorney (If Known): ,	unknown
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Physician: Thomas E. Cate, DC

Address: 2828 E 51st Street, Suite 103
Tulsa, OK 74103

Make Checks Payable To: Cate Chiropractic Center

Tax ID Number: 73-1443096

Telephone Number: (918) 747-2225

State of Oklahoma)
County of Tulsa)



Physician Signature: _____

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 on his own free act and accord and for the uses and purposes therein set forth. In witness whereof, I have affixed my hand and official seal on this 07 day of Oct, 2011

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

Notary Public