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 2011-01-21. 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.

	Adjuster:
Defendant's Insurer: None	Policy or Claim no.:
Tulsa, OK 74121-2101	Joyce Moss
PO Box 22101	Adjuster:
State Farm Ins. Co.	36A711430
Patient's Insurer:	Policy or Claim no.:
⚠ Attached bill is not final lien. An☐ Attached bill is the final lien.☐ This lien ammends lien no., becau	
homa; pursuant to Okla. Stat. tit. 42 Mechanics and Materialman's lien ats due to Physician for services relating to injuries sustained by at occured on 2011-01-21. 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.	
YSICIAN'S LIEN	For Courts Use Only

Patient:	Patient's Insurer:	Policy or Claim no.
Rick Boyles	State Farm Ins. Co.	36A711430
1231 S Owasso ave	PO Box 22101	Adjuster:
Tulsa, Ok 74120	Tulsa, OK 74121-2101	Joyce Moss
Defendant:	Defendant's Insurer:	Policy or Claim no.:
	None	
		Adjuster:
,	,	
Other Responsible Party:	Other Party's Insurer:	Policy or Claim no.:
	None	
		Adjuster:
	,	

400 S Boston ave ste 500 Tulsa, Ok 74103

Physician: Thomas E. Cate, DC Make Checks Payable To: Cate Chiropractic Center Address: 2828 E 51st Street Tax ID Number: 73-1443096

> Tulsa, OK a Telephone Number: (918) 747-2225 Physician Signature:

State of Oklahoma) County of Tulsa)

Lien Amount \$665.0

nty and State, personally appeared the above Physician, Known

Before me, a Notary Public his own free act and accord and for the uses and purposes to be the same and identical affixed my hand and official seal on this therein set forth. In witness ther day of **Jan**, 20

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

Notary Public