## NOTICE OF PHYSICIAN'S LIEN

66, please enter this lien on the cket. This lien concerns amore dered to below named patient arising from an accident and being asserted against any ner Physician hereby places that is being asserted against any collected by said patient, the	clahoma; pursuant to Okla. Stat. tit. 4 ne Mechanics and Materialman's lies ounts due to Physician for service ent relating to injuries sustained by that occured on 2009-08-19. This lies real property owned by Patient, but the following parties on notice that the recovery or sum had or collected or the recovery of sum had or collected or the recovery of said accident is made by that or court award.	n s s y s n ut t is to or	
	X Attached bill is not final lien.	An amended lien to follow.	
Lien Amount \$295.0	☐ Attached bill is the final lien.	Attached bill is the final lien.	
	☐ This lien ammends lien no., be	cause:	
Patient: Delgado Isabella 6024 S Sante Fe	Patient's Insurer: None	Policy or Claim no.: Adjuster:	
Tulsa, Ok 74107	,		
Defendant: Suzanne Owen	Defendant's Insurer: Farmers Insurance Group PO Box 268994 Okla. City, OK 73126-8994	Policy or Claim no.: 1014433797 Adjuster:	
Other Responsible Party:	Other Party's Insurer: None	Policy or Claim no.:	
,	,	Adjuster:	
Patients Attorney (If Know	Robert Rode 400 S Boston ave ste Tulsa, Ok 74103		
Physician: Thomas E. Cate Address: 2828 E 51st Str Tulsa, OK 7  State of Oklahoma ) County of Tulsa)  State of Oklahoma of Tulsa	Tax ID Number:	• /	
Before me, a Notary Public		onally anneared the above Physician Vnov	

to be the same and identical person, Charles of his own free act and accord and for the uses and pulposes therein set forth. In witness thereof, I have affixed my hand and official seal on this day of 2009.

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

Notary Public

For Courts Use Only