

NT

63349

98 JUL 24 P2:21

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## HOSPITAL/PHYSICIAN LIEN

Mtn View Orthopedics & Sports Med  
 2301 Mountain View Blvd  
 Klamath Falls OR 97601  
 Hospital Lien Claimant's Name and Address  
 Paul E. Havel  
 909 S. 9th, Space#1  
 Lakeview, OR 97630  
 Injured Person's/Patient's Name and Address  
 After recording, return to (Name, Address, Zip):  
 Mtn. View Orthopedics & Sports Med  
 2301 Mountain View Blvd  
 Klamath Falls OR 97601  
 Attn: Rose

SPACE RESERVED  
 FOR  
 RECORDER'S USE

Fee: \$5.00

STATE OF OREGON,  
 County of Klamath } ss.

I certify that the within instrument was received for record on the 24th day of July, 1998, at 2:21 o'clock P.M., and recorded in book/reel/volume No. M98 on page 27242 and/or as fee/file/instrument/microfilm/reception No. 63349, Records of said County. Hospital Lien

Witness my hand and seal of County affixed.

Bernetha G. Letsch, Co. Clerk  
 NAME TITLE

By Kathleen Ross, Deputy

NOTICE IS HEREBY GIVEN that Mountain View Orthopedics & Sports Medicine (hereinafter called Claimant) of Klamath Falls has rendered hospitalization services or treatment for Paul E. Havel (hereinafter called Patient), a person who was injured on or about 06/06, 1998, in the City of Lakeview, Oregon, County, State of Ore, on or about 06/06, 1998. Claimant hereby claims a lien upon any money due or owing or any claim for compensation, damages, contribution, settlement or judgment from Paul E. Havel & California Casualty alleged to have caused injuries and any other person liable for the injury or obligated to compensate Patient on account of Patient's injuries. The hospitalization or treatment was rendered to the injured person between 06/06, 1998, and undetermined/any treatment related to accident on date of 06/06/98

## STATEMENT OF AMOUNT DUE

|       |    |  | Debit     | Credit |
|-------|----|--|-----------|--------|
| 07/09 | 98 | New patient office consultation  | \$ 157 00 | \$     |
| 97/09 | 98 | KT-1000 measurement  | 65 00     |        |
|       |    |  |           |        |
|       |    |  |           |        |
|       |    |  |           |        |
|       |    |  |           |        |
|       |    |  |           |        |
|       |    |  |           |        |
|       |    | Recorder's filing fee:   |           |        |
|       |    | Balance Due Claimant: \$222.00 and any future charges relate to accident of 6/6/98 |           |        |

Fifteen days have not elapsed since that time (the discharge of Patient from the hospital). Claimant's demands for care and service are in the sum of \$ 222.00. No part thereof has been paid, except \$ 0-. There is now due and owing and remaining unpaid thereupon, after deducting all credits and offsets, the sum of \$ 222.00, in which amount lien is hereby claimed.

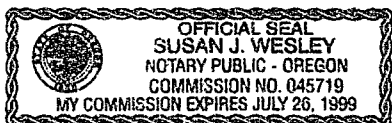
Mountain View Orthopedics & Sports Medicine, Claimant.  
 NAME OF HOSPITAL OR PHYSICIAN

By Rose M. Bernaldo  
 Title Assistant Office Manager

STATE OF OREGON, County of Klamath ) ss.

I, Rose M. Bernaldo, being first duly sworn on oath, say: That I am Asst. Office Manager of Mtn View Orthopedics & Sports med. named in the foregoing claim of lien. I have read the same, know the contents thereof and believe the same to be true.

Subscribed and sworn to before me this 24th day of July, 1998



Susan J. Wesley  
 Notary Public for Oregon.  
 My commission expires 7-26-99

ORS 87.565. When completed, and "not later than 15 days after the discharge of the patient from the hospital," the notice of lien shall be filed "with the recording officer of the county wherein such hospital is located." Also, prior to the date of judgment, settlement or compromise, certified copies of the notice shall be served "by registered mail or by certified mail with return receipt upon the person alleged to be responsible for causing the injury and from whom damages are claimed;" (to the last-known address of the person), and "the insurance carrier which has insured the person alleged to be responsible against such liability, if such insurance carrier is known."

I hereby certify that the foregoing is an exact and complete copy of the original thereof.

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