

63534

HOSPITAL LIEN

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'98 JUL 28 P3:02

NOTICE IS HEREBY GIVEN, That

MERLE WEST MEDICAL CENTER

of KLAMATH FALLS, OREGON has rendered services in hospitalization for Agnes M Parks-Zeman
 a person who was injured on the 15th day of July, 1998, in the City of _____
 County of Klamath, State of Oregon and the said MERLE WEST MEDICAL CENTER
 hereby claims a lien upon any money due or owing or any claim from any responsible party but any
insurance or third party payor in relation to this MUA and not limited to
other MWMc claims in relation et al.

alleged to have caused said injuries and/or any other person, corporation or association liable for said injury or
 obligated to compensate the said injured person on account of said injuries. The hospitalization was rendered to the
 said injured person between the 15th day of July, 1998, and the 21st day of July, 1998.

Ms Agnes Melvina Parks-Zeman

In Account with Claimant:

Dr.

Cr.

ACCOUNT NO. 2010591868

Balance Due Claimant:

\$ 10121.62

That fifteen days have not elapsed since the time (the completion of said hospitalization); that the claimant's
 demands for said care and/or services is in the sum \$ 10121.62
 Dollars and that no part thereof has been paid, except NONE Dollars and that there
 is now due and owing and remaining unpaid thereof, after deducting credits and offsets the sum of \$ 10121.62
 Dollars, in which amount lien is hereby claimed.

If the injured person is covered by Medicare, this Hospital Lien Notice is not intended to claim or perfect a lien on any
 insurance proceeds from, or insurer's obligations under, the liability coverage of an insurance policy.

Barbara Hart for M W M C
 Claimant

STATE OF OREGON

KLAMATH

ss.

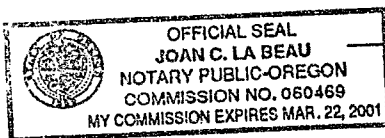
County of

Barbara Hart for M W M C, being first duly sworn on oath, say:

That I am ONE AND THE SAME named in the foregoing claim of lien; that I have read the same and know the
 contents thereof and believe the same to be true.

Barbara Hart for Merle West Medical Center

Subscribed and sworn to before me this 28th day of July, 1998



Joan C La Beau
 Notary Public for Oregon

My commission expires 3-22-2001

Hospital Lien

Return:

Merle West Medical

2865 Daggett Ave.

Klamath Falls, Or. 97601

STATE OF OREGON.

County of

I certify that the within instrument was

received for record on the 28thday of July, 1998, at 3:02o'clock P.M. and recorded in book M98on page 27635 Record of Hospital Liens

of said County.

Witness my hand and seal of County

affixed.

Bernetha G. Letsch,

County Clerk

Deputy

Fee: \$5.00