

NOTICE IS HEREBY GIVEN, That

MERLE WEST MEDICAL CENTER

of KLAMATH FALLS, OREGON has rendered services in hospitalization for Laurie Lee Lahue
 a person who was injured on the 1st day of October, 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 be it
any insurance or third party payor in relation to this MUA
and not limited to other MUMC 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 1st day of October, 1998, and the 11th day of November, 1998.

MS Laurie Lee Lahue

In Account with Claimant:

Dr.

Cr.

ACCOUNT NO. 2010620824

Balance Due Claimant:

\$ 75192.09

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 \$ 75,192.09
 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 \$75,192.09
 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 MUMC

Claimant

STATE OF OREGON

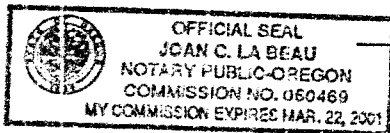
County of KLAMATH

ss.

I, Barbara Hart for MUMC

, 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 CenterSubscribed and sworn to before me this 23rd day of November, 1998Joan C La Beau

Notary Public for Oregon

My commission expires 3-22-2001

Hospital Lien

Return:

Merle West Medical Center

2865 Baggett Ave.

Klamath Falls, Or. 97601

STATE OF OREGON.

County of Klamath

I certify that the within instrument was
 received for record on the 23rd
 day of November, 1998, at 2:50
 o'clock P. M., and recorded in book M98
 on page 42888 Record of Hospital Liens
 of said County.

Witness my hand and seal of County
affixed.Bernetha G. Letsch

County Clerk

Deputy

Fee: \$5.00