2 3 4 5 6 7 8 9 10 TELECOPIER (702) 329-8805 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25

SHEA

DURNEY, BRENNAN

PETER D. DURNEY HOMAS R. BRENNAN TERRANCE SHEA

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HOSPITAL LIEN ON SETTLEMENT, JUDGMENT AND COMPROMISE

WASHOE MEDICAL CENTER
A NON-PROFIT NEVADA CORPORATION
MILL AND KIRMAN
RENO, NEVADA

(NRS 108.590 THROUGH NRS 108.660)

NOTICE IS HEREBY GIVEN that WASHOE MEDICAL CENTER has rendered services in hospitalization for TRINITY COOPER, of Ely, Nevada, a person who was injured on the 3rd day of October, 1998, in the County of Eureka, State of Nevada, and that WASHOE MEDICAL CENTER hereby claims a lien upon any money due or owing or any claim for compensation, damages, contribution, settlement or judgment from any other person or persons, corporation or association alleged to have caused the injury, or liable for the injury or payment of the expenses herein incurred, said parties being the following:

C.N.A. INSURANCE

The hospitalization was rendered to the injured party beginning on October 3, 1998, through October 16, 1998, account number

ITEMIZED STATEMENT

Hospitalization and related medical services were rendered to the patient TRINITY COOPER, in accordance with the itemized statement attached hereto as Exhibit "A" and by this reference made a part hereof.

That ninety (90) days have not elapsed since the termination of hospitalization; and that the claimant's demands for such care or services are in the sum of EIGHTY-NINE THOUSAND SIX HUNDRED EIGHTY-NINE AND 42/100 (\$89,689.42), after deducting credits and offsets, with interest at the rate of Eighteen percent (18%) per annum commencing thirty (30) days from the date of discharge, in which amount lien is hereby claimed.

DATED this $\frac{28^{n}}{}$ day of October, 1998.

DURNEY, BRENNAN & SHEA

By:

TERRANCE SHEA

VERIFICATION

RENO, NEVADA 89509

DURNEY, BRENNAN &

PETER D. DURNEY THOMAS R. BRENNAN TERRANCE SHEA

STATE OF NEVADA) : ss.
COUNTY OF WASHOE)

I, the undersigned, being first duly sworn, under penalty of perjury, depose and say:

That WASHOE MEDICAL CENTER is the claimant herein named in the foregoing claim of lien; that I have read the same and know the contents thereof; that the same is true to the best of my knowledge, except as to those matters therein contained on information and belief, and as to those matters, I believe them to be true.

TERRANCE SHEA

SUBSCRIBED and SWORN to before me, a Notary Public, on this $\frac{28^{74}}{}$ day of October, 1998.

Storey Denoille Sampson-Mennandez

STACEY DENELLE SAMPSON-MERNANDEZ

Notary Public - State of Stavach Appointment Recorded in Washoo County No: 95-1261-2 - Expires October 15, 1999

lien.adh

PT N				MR NO: 0851955	
REG:	10/04/	98 DSCH: 10/16/98	FC: C PT: W	EXP IND: ACCT	BAL: 89689.42
					PAGE NO: 1
TOTAL CHARGES: 89689.42 NURSE STA/ROOM: 32 / 333					
	ACCT B	AL 588 V			PT BAL
	89689.	42 89689.42			.00
	LINE	DEPARTMENT	TOTAL AMT	INS BAL	PT BAL
!	1	ROOM CHARGES	9156.00	9156.00	0.00
!	2	EMERGENCY ROOM	251.24	251.24	0.00
!	3	PHARMACY	9013.32	9013.32	0.00
!	4	MED/SUR SUPPLY	35929.11	35929.11	0.00
į	5	LABORATORY	2256.34	2256.34	0.00
!	6	RADIOLOGY	2617.43	2617.43	0.00
!	7	C T SCAN	4939.65	4939.65	0.00
1	8	TRACTION	603.42	603.42	0.00
1	9	OPERATING ROOM	11806.18	11806.18	0.00
į	10	RADIOLOGY PHM	350.86	350.86	0.00
į	11	ANESTHESIA	1379.20	1379.20	0.00
1	12	MRI	4100.00	4100.00	0.00
!	13	RESPIRATRY THP	2303.21	2303.21	0.00
!	14	PHYSICAL THER	1055.68	1055.68	0.00
!	15	OCCUPATION THP	562.72	562.72	0.00
!	16	PROFEES	163.28	163.28	0.00
!	17	RECOVERY ROOM	348.28	348.28	0.00
!	18	OTH BLD PROCES	158.00	158.00	0.00
!	19	SELF ADM DRGS	250.67	250.67	0.00
1/	20	EKG	93.80	93.80	0.00
<u>!</u> /	21	EEG	2351.03	2351.03	0.00
	- F	79	No.		

BOOK 323 PAGE 069
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF Show
98 NOV-5 AM 11: 49

EUREKA COUNTY NEVADA M.N. REBALEATI. RECORDER FILE NO. FEE\$ 9.00

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