

Keith S.K. Ching
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One East Liberty Street, Suite 510
Reno, Nevada 89501
(702) 786-1161

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HOSPITAL LIEN

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

(N.R.S. 108.590, et. seq.)

NOTICE is hereby given that WASHOE MEDICAL CENTER has rendered services in hospitalization for JOSEPH P. VELLA, a person who was injured on the 22nd day of April, 1988, in the County of Douglas, State of Nevada, on or about the 22nd day of April, 1988; 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 liable for the injury alleged to have caused the injury, or liable for payment of the expenses herein incurred, said parties being the following:

COMMERCIAL INSURANCE

The hospitalization was rendered to the injured party between April 22, 1988 and April 27, 1988, Account Number 0038041976.

ITEMIZED STATEMENT

For hospitalization and related medical services rendered to the patient JOSEPH P. VELLA, 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 is in the sum of ELEVEN THOUSAND FORTY SEVEN DOLLARS AND SEVENTY FOUR CENTS (\$11,047.74), and no part thereof has been paid; and that there is now due and owing and remaining of such sum, after deducting all credits and offsets, the sum of ELEVEN THOUSAND FORTY SEVEN DOLLARS AND SEVENTY FOUR CENTS (\$11,047.74), with interest at the rate of Twelve Percent (12%) per annum commencing 30 days from date of discharge, in which amount lien is hereby claimed.

WASHOE MEDICAL CENTER
A Non-profit Nevada Corporation

By *Ray White*
RAY WHITE, Legal Coordinator

179373

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STATE OF NEVADA)
) ss:
COUNTY OF WASHOE)

I, RAY WHITE, being first duly sworn deposes and says:
That she is the claimant herein named in the foregoing
claim of lien; that he has read the same and know the
contents thereof; that the same is true to the best of his
knowledge, except as to those matters therein contained on
information and belief, and as to those matters he believes
them to be true.

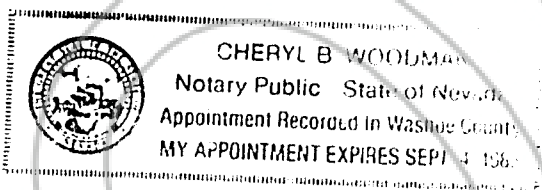
Ray White

RAY WHITE, Legal Coordinator

SUBSCRIBED and SWORN to before me
this 2 day of June, 1988.

Cheryl B. Woodman

NOTARY PUBLIC



Keith S.K. Ching
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Reno, Nevada 89501
(702) 786-1161

WASCO MEDICAL CENTER
77 PRINGLE WAY
RENO, NEVADA 89520
(702) 820-4180

3 PATIENT CONTROL NUMBER
0036041976

4 TYPE OF BILL
111

8 BC/BS PROV NO 031 9 FEDERAL TAX NO 88-021374 7 MEDICARE NO 29-0001 8 MEDICAID NO 11-11595 9 OCCASIONAL CHARGE NO 000254 10 OTHER IDENTIFICATION NO V001992

10 PATIENT'S LAST NAME VELLA, JOSEPH P. 11 PATIENT'S ADDRESS 424 MAPLE SAN BRUNO CA 94096 12 CITY SAN BRUNO 13 STATE CA 14 ZIP 94096

15 BIRTH DATE 0-09-50 16 SEX M 17 ADMISSION DATE 4-22-85 18 AM 19 AM 20 AM 21 AM 22 AM 23 AM 24 AM 25 AM 26 AM 27 AM 28 AM 29 AM 30 AM 31 AM 32 AM 33 AM 34 AM 35 AM 36 AM 37 AM 38 AM 39 AM 40 AM 41 AM 42 AM 43 AM 44 AM 45 AM 46 AM 47 AM 48 AM 49 AM 50 AM 51 AM 52 AM 53 AM 54 AM 55 AM 56 AM 57 AM 58 AM 59 AM 60 AM 61 AM 62 AM 63 AM 64 AM 65 AM 66 AM 67 AM 68 AM 69 AM 70 AM 71 AM 72 AM 73 AM 74 AM 75 AM 76 AM 77 AM 78 AM 79 AM 80 AM 81 AM 82 AM 83 AM 84 AM 85 AM 86 AM 87 AM 88 AM 89 AM 90 AM 91 AM 92 AM 93 AM 94 AM 95 AM 96 AM 97 AM 98 AM 99 AM 100 AM

21 OCCURRENCE 22 OCCURRENCE 23 OCCURRENCE 24 OCCURRENCE 25 OCCURRENCE 26 OCCURRENCE 27 OCCURRENCE 28 OCCURRENCE 29 OCCURRENCE 30 OCCURRENCE 31 OCCURRENCE 32 OCCURRENCE 33 OCCURRENCE 34 OCCURRENCE 35 OCCURRENCE 36 OCCURRENCE 37 OCCURRENCE 38 OCCURRENCE 39 OCCURRENCE 40 OCCURRENCE 41 OCCURRENCE 42 OCCURRENCE 43 OCCURRENCE 44 OCCURRENCE 45 OCCURRENCE 46 OCCURRENCE 47 OCCURRENCE 48 OCCURRENCE 49 OCCURRENCE 50 OCCURRENCE 51 OCCURRENCE 52 OCCURRENCE 53 OCCURRENCE 54 OCCURRENCE 55 OCCURRENCE 56 OCCURRENCE 57 OCCURRENCE 58 OCCURRENCE 59 OCCURRENCE 60 OCCURRENCE 61 OCCURRENCE 62 OCCURRENCE 63 OCCURRENCE 64 OCCURRENCE 65 OCCURRENCE 66 OCCURRENCE 67 OCCURRENCE 68 OCCURRENCE 69 OCCURRENCE 70 OCCURRENCE 71 OCCURRENCE 72 OCCURRENCE 73 OCCURRENCE 74 OCCURRENCE 75 OCCURRENCE 76 OCCURRENCE 77 OCCURRENCE 78 OCCURRENCE 79 OCCURRENCE 80 OCCURRENCE 81 OCCURRENCE 82 OCCURRENCE 83 OCCURRENCE 84 OCCURRENCE 85 OCCURRENCE 86 OCCURRENCE 87 OCCURRENCE 88 OCCURRENCE 89 OCCURRENCE 90 OCCURRENCE 91 OCCURRENCE 92 OCCURRENCE 93 OCCURRENCE 94 OCCURRENCE 95 OCCURRENCE 96 OCCURRENCE 97 OCCURRENCE 98 OCCURRENCE 99 OCCURRENCE 100 OCCURRENCE

34 VELLA, JOSEPH P.
424 MAPLE
SAN BRUNO CA 94096

50 DESCRIPTION	51R CODE	52 S UNITS	53 TOTAL CHARGES	54	55	56
RED/SURG/GYN SEPT	280.00	121	1400.00	1400.00		
PHARMACY		250	766.90	766.90		
RED/SURG SUPPLIES		270	882.85	882.85		
PROSTHETIC DEVICES		274	512.00	512.00		
LABORATORY		300	1067.00	1067.00		
RADIOLOGY		320	1131.00	1131.00		
OPERATING ROOM		360	2807.50	2807.50		
ANESTHESIA		370	435.00	435.00		
RESPIRATORY		410	46.00	46.00		
PHYSICAL THERAPY		420	410.00	410.00		
EMERGENCY ROOM		430	360.90	360.90		
AIR AMBUANCE		545	990.09	990.09		
RECOVERY ROOM		710	238.50	238.50		
TOTALS		451	11047.74	11047.74		

67 COMMERCIAL INSURANCE
68 DEDUCTIBLE
69 CO-INSURANCE
70 EST RESPONSIBILITY
71 PRIOR PAYMENTS
72 EST AMOUNT DUE

DUE FROM PATIENT 11047.74

65 INSURED'S NAME PATIENT 66 SEX M 67 REL 01 68 CERT-SSN-110-ID NO 7023 69 GROUP NAME FITTER VIKING 70 INSURANCE GROUP NO 591807023

71 EMPLOYER NAME FITTER VIKING PROTECTION 72 EMPLOYEE ID 7028 73 EMPLOYER LOCATION

74 PRINCIPAL AND OTHER DIAGNOSES DESCRIPTIONS
75 PRN CODE 93021 76 OTHER DIAGNOSES CODES 93104 18162

77 PRINCIPAL AND OTHER PROCEDURES DESCRIPTIONS
78 PRINCIPAL PROCEDURE 9935 DATE 79 OTHER PROCEDURE 5732 DATE 80 OTHER PROCEDURE 9999 DATE

81 TREATMENT AUTH 82 ATTENDING PHYSICIAN ID NVC 52655 CAFFERATA, H T 83 OTHER PHYSICIAN ID 179373

84 APP FROM NATIONAL SPRINKLER IND WELDARE FUND 85 APP THROUGH 86 GPC 87 VERIFIED N-C STAY DATES FROM THROUGH 88 FOR INTERMEDIARY USE ONLY PRN PSC ID 89 AMT REIMBURSED 90 N PFM CD 91 APPROV BY 92 DATE APPROV

93 I CERTIFY THAT THE CERTIFICATIONS ON THE REVERSE APPLY TO THIS BILL AND ARE MADE A PART HEREOF
94 PROVIDER REPRESENTATIVE X 95 DATE

COPY

REQUESTED BY

Keith S. ...

IN OFFICIAL RECORDS OF
CLERK OF SUPERIOR COURT, NEVADA

~~CONFIDENTIAL~~

'88 JUN -6 A11 :08

SUZANNE BEAUDREAU
RECORDER

See PAID DEPUTY

179373

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