

NO APN

DOUGLAS COUNTY, NV

2014-852166

Rec:\$16.00

\$16.00 Pgs=3

11/05/2014 12:09 PM

CARDON OUTREACH

KAREN ELLISON, RECORDER

File & Return to:

Areli Torres
Cardon Outreach
890 Mill Street, Suite 405
Reno, NV 89502

HOSPITAL LIEN ON
SETTLEMENT, JUDGMENT AND COMPROMISE
RENOWN MEDICAL CENTER
(NRS 108.590 THROUGH NRS 108.660)

NOTICE IS HEREBY GIVEN that RENOWN REGIONAL MEDICAL CENTER has rendered services in hospitalization for **MANNY MARISCAL**, a person who was injured on the **13TH day of the month of JULY of the year 2014** in the city of STATELINE, county of DOUGLAS, and that RENOWN REGIONAL MEDICAL CENTER hereby claims a lien upon any money due or owing or any claim for compensation, damages, contribution, settlement or judgment from;

1. **HERTZ CLAIM# 05201434296, 2923 BRADLEY STREET, PASADENA CA 91107**
2. **JUN YIZE**

alleged to have caused the injuries, or any other person, corporation or association liable for the injury. The hospitalization was rendered to the injured person between the 13TH day of the month of JULY of the year 2014 and the 13TH day of the month of JULY of the year 2014.

ITEMIZED STATEMENT

Hospitalization and related medical services were rendered to the patient **MANNY MARISCAL**, 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; that the claimant's demands for such care or service is in the sum of **\$9,509.00** and that no part thereof has been paid except **\$0.00**; and that there is now due and owing and remaining unpaid of such sum, after deducting all credits and offsets, the sum of **\$9,509.00**, in which amount lien is hereby claimed.

VERIFICATION

State of Nevada }

} ss:

County of Washoe }

I, Areli Torres being first duly sworn, on oath say:

That RENOWN REGIONAL MEDICAL CENTER is the claimant herein 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.

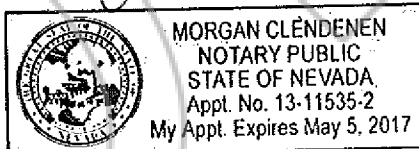
Areli Torres

Areli Torres

On this 31st day of **OCTOBER 2014**, personally appeared before me, a Notary Public, Areli Torres, known to me to be the person described n and who executed the foregoing instrument on behalf of RENOWN REGIONAL MEDICAL CENTER.

Subscribed and sworn to before me this 31st day of the month of **OCTOBER** of the year 2014.

Morgan Clendenen



RENOWN REGIONAL MEDICAL CENTER

EXHIBIT "A"

INVOICE

Guarantor:		MANNY MARISACAL				
Street:		3944 CLEAR ACRE LANE #254				
City:		RENO				
State:		NV				
Zip:		89512				
Admit Date	Discharge Date	Patient's Name	Renown Health Account	Total Charges	Payments	Balance
07/13/2014	07/13/2014	MANNY MARISCAL	5005687	\$9,509.00	\$0.00	\$9,509.00
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$

Renown Regional Medical Center
Business Office
PO Box 30006
Reno, NV 89520-3006