

DOUGLAS COUNTY, NV

2021-973734

Rec:\$40.00

\$40.00 Pgs=3

09/09/2021 08:47 AM

MED-DATA, INC

KAREN ELLISON, RECORDER

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TITLE OF DOCUMENT

(DO NOT Abbreviate)

HOSPITAL LIEN

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MED DATA

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City/State/Zip THE WOODLANDS, TX 77386

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This page provides additional information required by NRS 111.312 Sections 1-2.

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P:\Common\Forms & Notices\Cover Page Template Oct2017

HOSPITAL LIEN

Notice is hereby given that Renown Regional Medical Center has rendered services in hospitalization for Ronald Elben , a person who was injured on 6/16/2021, in the city of GARDNERVILLE, 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 Geico, Claim no(s) 0480739910101123, 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 6/16/2021 and 7/26/2021.

Attached please find "Exhibit A" as an Itemized Statement of Charges.

That 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 \$ 410,897.76, 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 \$ 410,897.76, in which amount lien is hereby claimed.

Renown Regional Medical Center, *Claimant.*

By: *Deneeka D Hunter*
Deneeka D Hunter
TPL Specialist, Med-Data, Incorporated
Agent for Renown Regional Medical Center

ACKNOWLEDGMENT

**STATE OF TEXAS
COUNTY OF MONTGOMERY**

I, Deneeka D Hunter, being first duly sworn, on oath say:

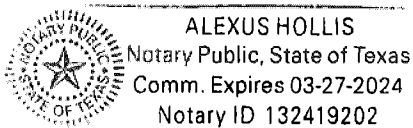
That I am Deneeka D Hunter, named in the foregoing claim of lien; that I have read the same and know the contents thereof and believe the same to be true.

Signed and subscribed before me on 09/08/2021

Deneeka D Hunter
Deneeka D Hunter

Alexus Hollis
Alexus Hollis
Notary Public, State of Texas
My commission expires: 3/27/2024

Please return original to:
Med-Data, Incorporated
25700 Interstate 45 Ste 300
The Woodlands, Texas 77386



Renown Regional Medical Center

EXHIBIT "A"

INVOICE

Guarantor:	RONALD ELBEN					
Street:	107537 US Highway 395 Spc 1					
City:	Coleville					
State:	CA					
Zip:	96107					
Admit Date	Discharge Date	Patient's Name	Renown Regional Medical Center Account	Total Charges	Payments	Balance
6/16/2021	7/26/2021	Ronald Barry Elben	23557811	\$410,897.76	\$0.00	\$410,897.76

Renown Regional Medical Center
Business Office
PO BOX 30006
RENO, NV 89520