

In the City of _____, and the said Providence Hospital above mentioned,
I, the undersigned, do hereby release and discharge the said hospital
from all claims for loss or any claim for compensation, damages, contribution, or otherwise, in
respect of any personal injury sustained by me.

Alleged to have caused said injuries by/ or any other person, corporation or organization that
is in any way connected to or connected with the said injured person on account of said injuries. The hospitalization
was rendered to the said injured person between the _____ day of _____
and the _____ day of _____ 19____ M. D. A. S. C.

IN ACCOUNT WITH CLAIMANT. PROVIDENCE HOSPITAL

Item	Description	Amount
1	Admission	\$1.00
2	Food	\$1.00
3	Drugs	\$1.00
4	Medical Service	\$1.00
5	Equipment	\$1.00
6	Other	\$1.00
7	Total	\$1.00

Total \$1.00

That fifteen days have not elapsed since that time; that the claimant's demands for care and/or
services is in the sum of one hundred and forty three dollars 43/100 Dollars,
and that no part thereof has been paid, except one dollar Dollars,
and that there is now due and owing and remaining unpaid thereof, after deducting all credits and offsets,
the sum of one hundred and forty two dollars 43/100 Dollars, in which amount I am hereby
claimed.

D. Clark

Claimant.

PROVIDENCE HOSPITAL
700 - NE - 47th Avenue
Portland, Oregon, 97219

STATE OF OREGON
County of Multnomah

I, D. Clark, being first duly sworn on oath, say;
That I am claimant for Providence Hospital named in the foregoing claim of Non; that I have read the same
and know the contents thereof and believe the same to be true.

D. Clark

Subscribed and sworn to before me this _____ day of _____

19____
M. D. A. S. C.

Notary Public for Oregon

Commissioner of Deeds

74098

BOOK A PAGE 666

NOTICE IS HEREBY GIVEN, That the Sisters of Providence in Oregon, an Oregon corporation doing business as Providence Hospital of Portland, Oregon, has rendered services in hospitalization for

a person who was injured on the 10 day of Aug, 1962, in the City of Portland, County of Clackamas,

State of Oregon, and the said Providence Hospital hereby claims a lien upon any money due or owing or any claim for compensation, damages, or retribution, settlement or judgment from Robert E. Shaver & State Farm Insurance - 2400 Flamingo - Las Vegas - Nevada

Alleged to have caused said injuries and/or any other person, corporation or association liable for said injury or obligated to compensate the aforesaid injured person on account of said injuries. The hospitalization was rendered to the said injured person between the 10 day of Aug, 1962,

and the 23 day of Aug, 1962. Mr. Robert Shaver - O.R.C.U.P. - State Farm Insurance - Las Vegas

SUBSCRIBED AND SIGNED

IN ACCOUNT WITH CLAIMANT: SISTER MARY ANN

Room & Board	\$12.00
Bedsheets	1.00
Medication	0.60
Saline	0.00
Medical Equipment	0.00
Medical Record	0.00
Laundry	0.00
Food	0.00
Drugs	0.00
Other	0.00
Total	\$13.60

Total \$ 13.60

CCB 12

That fifteen days have not elapsed since the date that the claimant's demands for services and/or services in the sum of \$13.60 were last outstanding - 1962 Dollars, and then no part thereof has been paid except 0.00 Dollars, and that there is now due the following and remaining unpaid thereof, after deducting all credits and offsets, the sum of \$13.60 Dollars, in which amount lien is hereby claimed.

B. Callahan

Claimant.

PROVIDENCE HOSPITAL
700 - 14th - 47th Avenue
Portland, Oregon, 97213

STATE OF OREGON
County of Multnomah

I, D. Roberts, M. V. Clerk, being first duly sworn on oath, say
That I am claimant for Providence Hospital 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.

D. Roberts

Subscribed and sworn to before me this

13 day of

Aug, 1962.

907, 11-3
8-771

Notary Public for Oregon

Commission expires

NOTICE IS HEREBY GIVEN, That the Sisters of Providence in Oregon, an Oregon corporation doing business as Providence Hospital of Portland, Oregon, has rendered services in hospitalization for Frank Martin, a person who was injured on the 24 day of May, 1958, in the City of Portland, County of Multnomah, State of Oregon, and the said Providence Hospital hereby claims a lien upon any money due or owing or any claim for compensation, damages, contribution, settlement or judgment from Robert W. Edwards & Sons, Inc., Engineers, 1118 Broadway, Portland, Oregon.

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 22 day of May, 1958, and the 21 day of June, 1958. Mr. George Miller, Clerk, Providence Hospital.

ITEMS FOR WHICH LIEN IS CLAIMED

IN ACCOUNT WITH CLAIMANT: PROVIDENCE HOSPITAL

Admission	\$ 25.00
Drugs	1.00
Medical Expenses	320.00
Nursing Care	520.75
Capital Supply	20.00
General Hospital	416.00
Laboratory	283.57
Physician	200.00
Supplies	10.55
Transportation	100.00
Surgeon	600.00
Total	\$ 2,250.32

That fifteen days have not elapsed since that time; that the claimant's demands for said care and/or services is in the sum of One Thousand One Hundred Fifty Dollars and 32 Cents Dollars, and that no part thereof has been paid, except 100 Dollars, and that there is now due and owing and remaining unpaid thereof, after deducting all credits and offsets, the sum of 2,150.32 Dollars, in which amount lien is hereby claimed.

B. Calfee

Claimant.

PROVIDENCE HOSPITAL
700 - NE - 47th Avenue
Portland, Oregon, 97219

STATE OF OREGON
County of Multnomah

I, B. Calfee, M. V. Clerk, being first duly sworn on oath, say: That I am claimant for Providence Hospital 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.

B. Calfee

Subscribed and sworn to before me this 23 day of June, 1958,

907, 11-8
R-7/71

Georges W. Black
Notary Public for Oregon

Commission expires: 12/1/68

PROVIDENCE HOSPITAL OF TUALATIN, Oregon, has rendered services in hospitalization.

IL DOTTOR WILSON INSEGNA UNA LEZIONE

State of Washington, and the said Provider as Hospital hereby claims a lien upon
any money due or owing or any claim for compensation, damages, contribution, settlement or judgment
from Patricia A. Weller a widow, deceased, deceased, deceased.

1922年1月1日，中華民國政府在南京成立，是為中華民國第一屆臨時政府。

IN ACCOUNT WITH CLAIMANT: UNPAID AND UNPAID

General A **Group** B **With** **the**
same **Group** **and** **the** **same**
Individual **Group**
Control **Group**
Experimental **Group**
Experimental **Group**
Control **Group**
Experimental **Group**
Control **Group**

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That fifteen days have not elapsed since that time; that the claimant's demands for aid, care and/or services is in the sum of ~~One Thousand Six Hundred Sixty Seven and 25/100 Dollars,~~
and then no part thereof has been paid, except ~~Two~~ Dollars,
and that there is now due and owing and remaining unpaid thereof, after deducting all credits and offsets,
the sum of ~~622.81~~ is Due, in which amount he is hereby
ordered.

B. Cawthon

G. B. HOGG

PRINCEWOOD TERRACE
700 - NW - 47th Avenue
Portland, Oregon 97210

STATE OF WISCONSIN
County of Milwaukee

I, R. Hollister, M. V. C. S., being first duly sworn on oath, say: That I am claimant for Providence Hospital named in the foregoing claim of his; that I have read the same and know the contents thereof and believe the same to be true.

D. Calfee

Classification and structure of enzymes are discussed.

1948. 1月 11
32-2787

o than *George Washington* day of *September* 1883

Commissioner opinions