

RETURN ADDRESS

Columbia United Providers
19120 SE 34th St #201
Vanconver, WA 98683

Please print neatly or type information
Document Title(s)

Medical Assistance Lien

Reference Number(s) of related documents:

Grantor(s) (Last name, First name and Middle Initial)

Additional Reference #'s on page

Daniel A. Oeser

Grantee(s) (Last name, First name and Middle Initial)

Additional grantors on page

Columbia United Providers

Additional grantees on page

Legal Description: (abbreviated form: i.e. lot, block, plat or section township, range, quarter/quarter)

Assessor's Property Tax Parcel/Account Number

Additional legal is on page

Additional parcel #'s on page

The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.

STATEMENT OF LIEN

NOTICE IS HEREBY GIVEN that Columbia United Providers ("CUP"), an assignee of the rights and remedies provided to the Department of Social and Health Services pursuant to RCW 74.09.180, RCW 43.20B060, and related statutes, has rendered assistance and/or provided medical benefits to Daniel A Oeser, a person who was injured on or about November 24, 2003, in or about the area of Ferry county, Washington, and the said assignee hereby asserts a lien, to the extent provided in RCW 43.20B.60, and related statutes, for the amount of such assistance or residential care, upon any sum due and owing Daniel A Oeser, from any person alleged to have caused the injury, and/or his/her insurer, and from any other person or insurer liable to the injury or obligated to compensate the injured person on account of such injuries, by contract or otherwise.

Columbia United Providers

By: Barbara Knapp
Barbara Knapp

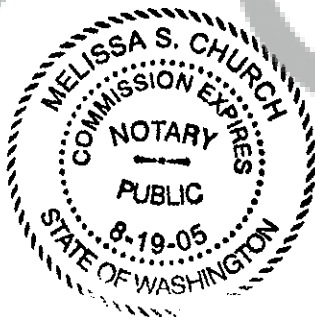
STATE OF WASHINGTON)
:ss.

COUNTY OF CLARK)

I, Barbara Knapp, being first duly sworn, on oath state: That I am Third Party Benefits Specialist for CUP, that I have read the foregoing Statement of Lien, know the contents thereof, and believe the same to be true.

Barbara Knapp

SUBSCRIBED and SWORN to before me this 10th day of February, 2004.



Melissa S. Church
PRINT NAME Melissa S. Church
Notary Public in and for the State of
Washington, County of Clark
Commission expires: 8-19-05

Lien3672