

## **EXHIBIT M**

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Hoyp

William Bradley  
4444 E Maplewood St  
Gilbert, AZ 85297

**DO NOT PAY THIS STATEMENT. THIS IS NOT A BILL. THE INFORMATION PROVIDED BELOW IS FOR INFORMATIONAL PURPOSES ONLY. THIS IS A LIEN ON ANY CLAIMS OF LIABILITY OR INDEMNITY OF THE PATIENT ARISING FROM THIS TREATMENT.**

**NOTICE AND CLAIM OF HEALTH CARE PROVIDER LIEN**

Name & Address of Claimant Provider: Dignity Health dba Chandler Regional Medical Center and/or Mercy Gilbert Medical Center and/or their Urgent Care facilities  
475 South Dobson Road, Chandler, AZ 85224

Name & Address of Agent: Richard B. Burnham, Gammage & Burnham, 2 N. Central Ave., 15<sup>th</sup> Fl, Phoenix, AZ 85004

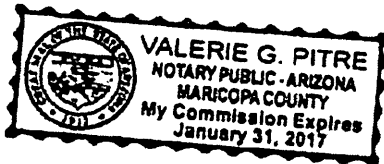
Name of Patient: William Bradley  
Account No.: 84004544304 and continuing care and any follow up accounts  
Dates of Patient's Service: 8/10-11/2016  
Amount Due for Care of Patient: \$3,322.72  
Trauma Physician Charges: INQUIRE

Dignity Health pursuant to the laws of the State of Arizona hereby claims a lien upon any and all causes of action, suits, claims, counterclaims, or demands for damages accruing to the patient named herein, or to the legal representative of such patient, on account of injuries giving rise to such causes of action and which necessitated his or her care, for its customary charges for hospital and physician care and treatment of the above named injured patient to the sum hereinabove claimed to be due together with any charges owing for continuing treatment. Dignity Health and any physicians for whom it is acting as agent or assignee claim an ongoing lien for any continuing treatment related to these injuries. Dignity Health is filing the physician's lien as agent or assignee for the physician. The name and address of the patient stated above are as they appear on the records of this hospital. Within five (5) days of recording this lien a copy will be mailed to the patient. This lien does not reflect on the patient's credit as it will attach to third party claims even if the patient has no personal liability for the bill. See *Andrews, et al. v. Samaritan Health System*, 201 Ariz. 379, 36 P.3d 57 (App. 2001); A.R.S. § 36-2903.01(G)(4).

If Dignity Health received payment on the above account(s) from Medicare or a Medicare Advantage plan, this lien will be enforced only to the extent of any unpaid deductibles, co-insurance, or other personal liability of the patient.

STATE OF ARIZONA )  
 ) ss.  
County of Maricopa )

The signatory, upon her oath deposes and states that she is Lockbox Supervisor for Patient Financial Services of Optum360 and makes this Notice and Claim of Lien for and on behalf of said hospital, being authorized to do so, that the statements contained in the foregoing Notice and Claim of Lien are true.



*Rosanna Sawalhi*  
Rosanna Sawalhi  
Dated September 23, 2016  
*Valerie G. Pitre*  
Notary Public