

When recorded, mail copy to:
Office of Recovery Services
Bureau of Medical Collections
Attn: Aimee Mansfield
C/O 515 E 100 S
PO Box 45025
Salt Lake City, UT 84145-0025

PARCEL I.D. #: 21-20-333-028-0000

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12/06/2021 10:52 AM \$0.00
Book - 11278 Pg - 1438
RASHELLE HOBBS
RECODER, SALT LAKE COUNTY, UTAH
UT ST-RECOVERY SERVICES
PO BOX 45025
SLC UT 84145-5025
BY: DNA, DEPUTY - MA 1 P.

NOTICE OF STATUTORY LIEN

Office of Recovery Services/Bureau of Medical Collections

The undersigned, for and on behalf of the Office of Recovery Services/Bureau of Medical Collections, pursuant to the provisions of 26-19-405, Utah Code Annotated 1953, as amended, asserts a lien in the sum of \$10,380.34 against the real property located in SALT LAKE County, State of Utah, to wit:

LOT 165, DIXIE VALLEY #2 5125-0196 5670-2353 6429-2362 6576-0587

Property Address: 6650 S KENTUCKY DR, WEST JORDAN, UT 84084
Property Owner: ALVA, SHONNA

Dated this 2nd day of December, 2021.



Almee Mansfield
Office of Recovery Services
Bureau of Medical Collections
Telephone: (801) 536-8798
Extension: 14699
Fax Number: (801) 536-0377
E-mail: almeemansfield@utah.gov

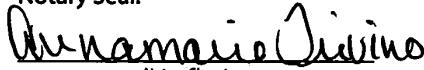
State of Utah

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County of Salt Lake

On this 2nd day of December, in the year 2021, before me, Annamarie Trivino
Notary Name
a notary public, personally appeared Almee Mansfield,
Document Signer proved on a basis of satisfactory evidence
to be the person whose name is subscribed to in this document, and acknowledged he/she executed the same.

Notary Seal:



Notary Signature

