

JOE B. RAY, M.D.  
Plaintiff  
VS.  
SAM MIMS  
Defendant

IN THE CIRCUIT COURT OF  
BALDWIN COUNTY, ALABAMA

AT LAW

NO. 7722

1.

The Plaintiff claims of the Defendant the sum of TWO HUNDRED FIFTY and 00/100 DOLLARS (\$250.00) due from him by account on the 13th day of February, 1966, which sum of money with the interest thereon, is still unpaid.

2

The Plaintiff claims of the Defendant the sum of TWO HUNDRED FIFTY and 00/100 DOLLARS (\$250.00) due from him by account on, to-wit, February 13, 1966, which sum of money with the interest thereon is still unpaid.

An itemized statement of the account sued on, verified by the affidavit of a competent witness, is attached hereto as Exhibit "A" and made a part hereof.

WILTERS, BRANTLEY & NESBIT

By WALTER S. Nesbit

Attorneys for the Plaintiff

FILED

SEP 5 1967

ALICE J. BUCK

CLERK  
REGISTER

SUMMONS AND COMPLAINT

MOORE PRINTING CO., BAY MINETTE, ALA.

STATE OF ALABAMA

Baldwin County

Circuit Court, Baldwin County

No. ....

.....TERM, 19.....

TO ANY SHERIFF OF THE STATE OF ALABAMA:

You Are Hereby Commanded to Summon SAM MIMS

.....  
.....  
.....

to appear and plead, answer or demur, within thirty days from the service hereof, to the complaint

filed in the Circuit Court of Baldwin County, State of Alabama, at Bay Minette, against.....

SAM MIMS

....., Defendant.....

by .....

JOE B. RAY, M. D.

....., Plaintiff.....

Witness my hand this 5<sup>th</sup> day of Sept. 1967

Ex 10-10-67

Alice J. Luck Clerk

No. 7722

Page.....

STATE OF ALABAMA

Baldwin County

CIRCUIT COURT

JOE B. RAY M.D.

Plaintiffs

vs.

SAM MIMS

Defendants

SUMMONS AND COMPLAINT

Filed FILED 19.....

Clerk

SEP 5 1967

CLERK  
REGISTER

WILTERS, BRANTLEY & NESBIT

Plaintiff's Attorney

Defendant's Attorney

Defendant lives at

RECEIVED

Received In Office

SEP 5 1967 19.....

TAYLOR WILKINS  
SHERIFF, Sheriff

I have executed this summons

this Oct 10 1967

by leaving a copy with

Sam Mims

Sheriff claims 4 miles or

Ten Cents per mile Total \$ .40

TAYLOR WILKINS, Sheriff

BY W. A. Tolbert

DEPUTY SHERIFF

Taylor Wilkins Sheriff

W. A. Tolbert Deputy Sheriff

D. Will

COUNTY OF MOBILESTATE OF ALABAMA

Be it remembered, that on this 28th day of August  
 A. D., 1957, personally appeared before me, the undersigned authority,  
Dr. Joe B. Ray known to me  
 who being duly sworn, upon his oath stated that he is  
 of  
 { a corporation organized and doing business under the laws of the State of  
 and has been duly authorized by said corporation to make this affidavit  
 { a partnership composed of  
 a sole trader doing business as physician  
 and that as such he makes this affidavit; that he is familiar with the books and business of  
 said Sam Mims; that the attached account against  
Sam Mims of 916 Hurricane Road Bay Minette, Ala.  
 is just and correct, within the knowledge of this affiant, that the items thereon stated and com-  
 posing the said account were sold and delivered to said Sam Mims  
 at { its  
their } special instance and request, that credit has been duly given for all payments and  
his  
 just and lawful offsets to which said account is entitled as thereon stated, and that the balance  
 thereof, amounting to the sum of Two Hundred Fifty & 00/100 Dollars  
 (\$ 250.00 ) with interest from 19 is justly due and  
 remains unpaid.

Joe B. Ray, MD X

I hereby certify under my official seal that I am authorized as a Notary Public to  
 administer oaths under the laws of the State of Alabama  
 and that the foregoing was subscribed and sworn to before me on the day and year  
 first above stated.

Stephen S. Galtier  
 Notary Public

## STATEMENT

JOE B. RAY, M. D.

Practice Limited to Orthopedic Surgery

Office Phone: 433-8802

166 Louiselle Street

MOBILE, ALABAMA 36607

Sam Mims  
916 Hurricane Road  
Bay Minette, Alabama

NUMBER	DATE	DESCRIPTION SEE CODE BELOW	CHARGE	PAYMENT	CURRENT BALANCE
	2-13-66	Adm. M. G. H.			
747	2-13-66	Sur.	\$1 00 00		\$1 00 00
714		MOBA ADM. & CARE	\$50 00		\$50 00
	2-21-66	Dis. Lgt. MGN			
	2-27-66	Letter to Mr. Wilson			

PLEASE PAY THE LAST FIGURE IN THIS COLUMN

BA - Broken Appointment

HC - File Insurance Claim

IM - Insurance Check

SP - Split

CC - Cash or Check

HC - Hospital Consultation

OV - Office Visit

ST - Shipping

CL - Cash

HV - Hospital Visit

ST - Cash Check

SIS - SICKLE

DS - Discharge

IM - Injection

SL - Sales

N.Y.S.

ET - Examination &amp; Report

THIS IS A THERMO FAX DRY COPY OF YOUR ACCOUNT AS IT APPEARS ON YOUR LEDGER CARD