BURTON H. SILVERSTEIN, d/b/a AAA ASSIGNMENT SERVICE, AS ASSIGNEE OF DRS. JOHN E. FOSTER AND JULIUSMICHAELSON, d/b/a MEDICAL ARTS CENTER	)	IN THE CIRCUIT COURT OF
	)	BALDWIN COUNTY, ALABAMA
Plaintiff	)	AT LAW
VS.	)	CASE NO. 8647
LUCIUS H. McKIBBON	)	
Defendant		

1.

The Plaintiff claims of the Defendant the sum of FIVE HUNDRED FIFTY FOUR and NO/100 DOLLARS ($554.00), due from him by account between the Defendant and Drs. John E. Foster and Julius Michaelson, d/b/a Medical Arts Center, on the 21st day of January, 1969, which sum of money, with interest thereon, is still unpaid and is the property of the Plaintiff by assignment made to him by Drs. John E. Foster and Julius Michaelson d/b/a Medical Arts Center on December 1, 1967.

2.

The Plaintiff claims of the Defendant the sum of FIVE HUNDRED FIFTY FOUR and NO/100 DOLLARS ($554.00), due from him by account between the Defendant and Drs. John E. Foster and Julius Michaelson, d/b/a Medical Arts Center on the 21st day of January, 1969, which sum of money, with interest thereon, is still unpaid and is the property of the Plaintiff by assignment made to him by Drs. John E. Foster and Julius Michaelson, d/b/a Medical Arts Center on December 1, 1967. A copy of the assignment and an itemized statement of the account sued on and assigned, verified by the affidavit of a competent witness, is attached hereto as Exhibits "A" and "B" and made a part hereof.

WILTERS, BRANTLEY & NESBIT

BY: Stuyvesant S. Nesbit
Attorney for Plaintiff

FILED

APR 10 1969

VOL 61 PAGE 782 ALICE J. DUCK CLERK REGISTER

Foley, Alabama

Dec. 1, 1967

For value received, we Dr. John E. Foster and Dr. Julius Michaelson d/b/a Medical Arts Center do hereby assign and set over to B.H.Silverstein D/B/A AAA Assignment Service the account owed us by

Lucius H. McKibbon

balance of $ 75.00

Medical Arts Center

By J. Michaelson M.D.

STATEMENT

MEDICAL ARTS CENTER

Box 910

FOLEY, ALABAMA

FAMILY CODE:
1 Helen
2 Jane
3 Ralph
4 Henry
5
6
7
8

Mr. Lucius H. McKibbon
Rt.1 Box 1 AB
Robertsdale, Ala.

NUMBER:
1 19226
2 18734
3 19227
4 20022
5
6
7
8
9
0

ACCOUNTS DUE AND PAYABLE WITHIN 30 DAYS

DATE	CODE Doctor	CODE Family	CODE Service	CHARGES	CREDITS	BALANCE
BALANCE FORWARDED				Nov 7'66		761.00
NOV 15'66	1,	3,	1	4.00		
NOV 15'66		3,	12	3.00		753.00
MAR 15'67	1,	3,	1	4.00		757.00
MAR 15'67		111,			12.00	745.00
MAR 16'67	1,	3,	1	4.00		749.00
APR 3'67	2,	1,	1	5.00		754.00
					10.00	744.00
JAN '68	322,200				10.00	734.00
MAR '68	322,200				20.00	714.00
APR '68	322,200				20.00	694.00
MAY '68	322,200				20.00	674.00
JUL '68	322,200				20.00	654.00
AUG '68	322,200				40.00	614.00
SEP '68	322,200				20.00	594.00
NOV '68	322,200				20.00	574.00
JAN '69	322,200				20.00	554.00

DOCTOR CODE
1 Dr. J. Michaelson
2 Dr. John E. Foster

PAYMENT CODE
111 From Insurance

1 Office Visit
2 Injection
3 Complete Exam
4 House Call
5 Night Call

SERVICE RENDERED CODE
6 Hospital Care
7 Surgery
8 X-Ray
9 EKG
10 Physiotherapy
11 Orthopedic Care or Cast
12 Laboratory
13 Sunday Call
14 Emergency Room Care

Pay Last Amount in this Column

15 OB Fee

STATEMENT

MEDICAL ARTS CENTER

Box 910

FOLEY, ALABAMA

FAMILY CODE:
1 Helen
2 Jane
3 Ralph
4 Nancy
5
6
7
8

Mr. & Mrs. Lucius McKibbon
Berry Ave.
Foley, Ala. 36535

NUMBER:
1 19028
2 18738
3 19227
4 20827
5
6
7
8

ACCOUNTS DUE AND PAYABLE WITHIN 30 DAYS

DATE	CODE Doctor	CODE Family	CODE Service	CHARGES	CREDITS	BALANCE
BALANCE FORWARDED				Sept 14'66		625.00
SEP 15'66		4,	2	3.00		628.00
SEP 15'66	2,	1,	8	10.00		
SEP 15'66		1,	2	3.00		641.00
SEP 20'66	1,	4,	1	4.00		645.00
OCT 10'66		4,	12	3.00		648.00
OCT 17'66	1,	2,	1	5.00		653.00
OCT 17'66	1,	2,	1			
OCT 17'66		2,	2	6.00		659.00
OCT 18'66		2,	2	3.00		662.00
OCT 19'66	2,	1,	1			
OCT 19'66		1,	2	6.00		668.00
OCT 19'66		2,	2	3.00		671.00
OCT 20'66	2,	1,	1			
OCT 20'66		1,	2	6.00		677.00
OCT 28'66	2,	2,	1			
OCT 28'66		2,	2	6.00		683.00
OCT 29'66	1,	2,	1			
OCT 29'66		2,	2	6.00		689.00
NOV 3'66	1,	1,	6	35.00		724.00
NOV 3'66	1,	2,	1	4.00		
NOV 3'66		2,	2	3.00		731.00
NOV 4'66	2,	2,	1	5.00		736.00
NOV 7'66	2,	1,	4	8.00		744.00

DOCTOR CODE
1 Dr. J. Michaelson
2 Dr. John E. Foster

PAYMENT CODE
111 From Insurance

SERVICE RENDERED CODE
1 Office Visit
2 Injection
3 Complete Exam
4 House Call
5 Night Call
6 Hospital Care
7 Surgery
8 X-Ray
9 EKG
10 Physiotherapy
11 Orthopedic Care or Cast
12 Laboratory
13 Sunday Call
14 Emergency Room Care
15 OB Fee

Pay Last Amount in this Column

CREDIT INFORMATION: VOL 61 PAGE 185

STATEMENT

MEDICAL ARTS CENTER

Box 810

FOLEY, ALABAMA

FAMILY CODE:
1 Helen
2 Jane
3 Ralph
4 Henry
5
6
7
8

Mrs. Lucius McKibbon
Berry Ave.
Foley, Ala.

NUMBERS:
1 19028
2 18738
3 19227
4 20827
5
6
7
8

DATE	CODE Doctor	CODE Family	CODE Service	CHARGES	CREDITS	BALANCE
BALANCE FORWARDED				Mar 30'66		593.00
APR 23'66		111,			15.00	578.00
MAY 19'66		111,			15.00	563.00
JUN 6'66	1,	3,	1	4.00		567.00
JUN 29'66	2,	4,	1			
JUN 29'66		4,	2	5.00		572.00
JUN 30'66	2,	4,	1			
JUN 30'66		4,	2	5.00		577.00
JUL 19'66	1,	2,	1	4.00		581.00
AUG 16'66	1,	1,	1	4.00		585.00
AUG 16'66	1,	3,	1	4.00		
AUG 16'66		3,	2	3.00		592.00
AUG 17'66	1,	1,	1	4.00		596.00
AUG 17'66	1,	3,	1			
AUG 17'66		3,	2	6.00		602.00
AUG 27'66	1,	3,	1	4.00		606.00
AUG 31'66	1,	2,	1	4.00		
AUG 31'66		2,	2	3.00		613.00
SEP 1'66	1,	2,	1			
SEP 1'66		2,	2	6.00		619.00
SEP 1'66		3,	12	3.00		622.00
SEP 2'66		2,	2	3.00		625.00
SEP 14'66	2,	1,	1	5.00		630.00
SEP 14'66	2,	4,	1	5.00		635.00
SEP 14'66					10.00	625.00

DOCTOR CODE
1 Dr. J. Michaelson
2 Dr. John E. Foster
3 Dr. R. A. Rowe
4 Dr. _____

SERVICE RENDERED CODE
1 Office Visit
2 Injection
3 Complete Exam
4 House Call
5 Night Call
6 Hospital Care
7 Surgery
8 X-Ray
9 EKG
10 Physiotherapy
11 Orthopedic Care or Cast
12 Laboratory
13 UA's or FB
14 Emergency Room

Pay Last Amount in this Column

VOL 64 PAGE 786

STATEMENT

MEDICAL ARTS CENTER

Box 910

FOLEY, ALABAMA

FAMILY CODE:		NUMBER:
1 Helen		1 19028
2 Jane		2 18738
3 Ralph	Mrs. Lucius McKibbon	3 19227
4 Henry	Berry Avenue	4 20827
5	Foley, Alabama	5
6		6
7		7
8		8

DATE	CODE Doctor	CODE Family	CODE Service	CHARGES	CREDITS	BALANCE
BALANCE FORWARDED				Dec 28'65		461.00
JAN 4'66	2,	1,	1			
JAN 4'66		1,	2	6.00		467.00
JAN 4'66					25.00	442.00
JAN 5'66	2,	1,	1			
JAN 5'66		1,	2	8.00		450.00
JAN 6'66	2,	1,	1			
JAN 6'66		1,	2	6.00		456.00
JAN 7'66	2,	1,	1			
JAN 7'66		1,	2	6.00		
JAN 7'66		1,	8	10.00		472.00
JAN 7'66		3,	12	3.00		475.00
JAN 17'66	2,	1,	6	25.00		
JAN 17'66	2,	1,	4	5.00		505.00
FEB 2'66		1,	2	3.00		508.00
FEB 4'66	2,	1,	1			
FEB 4'66		1,	2	5.00		513.00
FEB 8'66		1,	2	3.00		516.00
FEB 11'66		1,	2	3.00		519.00
FEB 19'66	2,	1,	1	6.00		525.00
FEB 22'66	2,	2,	6	20.00		545.00
MAR 1'66	1,	2,	1	4.00		549.00
MAR 9'66	2,	1,	1	4.00		553.00
MAR 9'66	2,	2,	1	1.00		554.00
MAR 9'66	2,	4,	1	4.00		[illegible]
MAR 30'66	2,	1,	6	25.00		[illegible]

DOCTOR CODE
1 Dr. J. [illegible]
2 Dr. John B. Foster
3 Dr. [illegible]
4 Dr. ____

SERVICE RENDERED CODE
1 Office Visit
2 Injection
3 [illegible]
4 [illegible]
5 [illegible]
6 Hospital Care
7 Surgery
8 [illegible]
9 [illegible]
10 [illegible]
11 Orthopedic Care
12 [illegible]

VOL. 61 PAGE 787

STATEMENT

MEDICAL ARTS CENTER

Box 810

FOLEY, ALABAMA

FAMILY CODE:
1 Lucius H
2 Helen
3 Jane
4 Ralph
5 Henry
6
7
8

Mrs. Lucius McKibbon
Berry Avenue
Foley, Ala.

NUMBER:
1 20091
2 19028
3 18738
4 19227
5 20827
6
7
8

DATE	CODE Doctor	CODE Family	CODE Service	CHARGES	CREDITS	BALANCE
BALANCE FORWARDED				Sept 13'65		452.00
SEP 13'65					25.00	427.00
SEP 16'65	3	2	1			
SEP 16'65		2	2	5.00		432.00
SEP 23'65	3	2	1	3.00		
SEP 23'65		2	9	12.00		447.00
SEP 23'65					25.00	422.00
SEP 23'65		4	2	3.00		425.00
OCT 1'65	3	2	1			
OCT 1'65		2	2	6.00		431.00
OCT 12'65	3	2	1			
OCT 12'65		2	2	6.00		437.00
OCT 14'65	2	3	1	4.00		441.00
OCT 16'65	3	2	1			
OCT 16'65		2	2	6.00		447.00
OCT 18'65					25.00	422.00
OCT 20'65	2	2	1			
OCT 20'65		2	2	6.00		428.00
NOV 1'65	3	2	6	10.00		438.00
NOV 12'65	2	2	1	4.00		442.00
NOV 17'65	2	2	1	4.00		446.00
DEC 17'65	2	3	1	4.00		450.00
DEC 23'65	2	2	1	5.00		455.00
DEC 28'65	2	2	1			
DEC 28'65		3	2	6.00		461.00

DOCTOR CODE
1 Dr. J. Nicholson
2 Dr. John E. Foster
3 Dr. E. A. Bozo

SERVICE RENDERED CODE
1 Office Visit
2 Injection
3 Complete Exam
4 House Call
5 Night Call
6 Hospital Care
7 Surgery
8 X-Ray
9 EKG
10 Physiotherapy
11 Orthopedic Care or Cast
12 Laboratory
13 VA or PH
14 Emergency Room

Past Load [illegible]
Amount Enclosed

VOL 61 PAGE 788

STATEMENT

MEDICAL ARTS CENTER

Box 910

FOLEY, ALABAMA

FAMILY CODE:
1 Lucius H
2 Helen
3 Jane
4 Ralph
5 Henry
6
7
8

Mr. Lucius McKibbon
Berry Ave.
Foley, Ala.

NUMBER:
1 20091
2 19028
3 18738
4 19227
5 20827
6
7
8

DATE	CODE Doctor	Family	Service	CHARGES	CREDITS	BALANCE
BALANCE FORWARDED				Oct 24'64		303.00
OCT 26'64	2,	4,	1	3.00		306.00
NOV 4'64	3,	2,	1	6.00		312.00
NOV 28'64	3,	2,	4	6.00		318.00
DEC 11'64	3,	2,	6	16.00		334.00
DEC 22'64		2,	2	3.00		337.00
DEC 26'64		2,	2	3.00		340.00
DEC 29'64		2,	2	3.00		343.00
DEC 31'64		2,	2	3.00		346.00
APR 14'65	3,	2,	6	24.00		370.00
MAY 15'65	3,	2,	1	6.00		376.00
MAY 24'65	3,	2,	1	4.00		380.00
MAY 29'65	3,	2,	1	5.00		385.00
JUN 2'65	3,	2,	1	5.00		390.00
JUN 8'65	3,	2,	6	10.00		400.00
JUN 28'65	3,	2,	1	5.00		405.00
JUL 16'65	3,	2,	4	8.00		413.00
JUL 29'65	2,	3,	1	3.00		416.00
SEP 4'65	2,	2,	1	8.00		424.00
SEP 4'65	2,	3,	1	1.00		425.00
SEP 7'65	1,	2,	1	5.00		430.00
SEP 8'65	2,	2,	1	6.00		436.00
SEP 8'65	3,	2,	1	6.00		442.00
SEP 11'65	3,	2,	1	6.00		448.00
SEP 13'65	3,	2,	1	4.00		452.00

Cont'd

DOCTOR CODE
1 Dr. J. Michaelson
2 Dr. John E. Foster
3 Dr. R. A. Rowe
4 Dr.

SERVICE RENDERED CODE
1 Office Visit
2 Injection
3 Complete Exam
4 House Call
5 Night Call
6 Hospital Care
7 Surgery
8 X-Ray
9 EKG
10 Physiotherapy
11 Orthopedic Care or Cast
12 Laboratory
13 VA or PB
14 Emergency Room

For Last Month in this Column
01 PAGE 103
VOL

STATEMENT

MEDICAL ARTS CENTER

P. O. DRAWER 1 0
FOLEY, ALABAMA

FAMILY CODE:
1 Lucius
2 Helen
3 Jane
4 Ralph
5 Henry
6
7
8

Mr. Lucius H. McKibben
Gen Del
Foley, Ala.

NUMBER:
1 20091
2 19020
3 10730
4 1922
5 2002
6
7
8

DATE	CODE Doctor	CODE Family	CODE Service	CHARGES	CREDITS	BALANCE
BALANCE FORWARDED					Bal. Nov 19	208.00
NOV 19'63	3,	2,	2	3.00		211.00
NOV 19'63	3,	5,	1	5.00		
NOV 19'63	3,	5,	12	5.00		221.00
DEC 6'63	2,	2,	6	30.00		251.00
DEC 19'63	4,	2,	1	3.00		254.00
DEC 24'63	4,	2,	6	10.00		264.00
JAN 11'64					16.00	248.00
JAN 20'64	3,	2,	1			
JAN 20'64		2,	2	6.00		254.00
JAN 21'64	3,	2,	1	4.00		259.00
JAN 22'64		2,	2	4.00		262.00
FEB 8'64					4.00	258.00
APR 28'64	3,	1,	16	5.00		263.00
MAY 11'64	2,	4,	1	5.00		
MAY 11'64		4,	8	10.00		278.00
MAY 13'64	2,	4,	1	4.00		282.00
MAY 23'64	2,	2,	6	10.00		292.00
JUN 9'64	1,	2,	1	4.00		296.00
JUN 15'64	3,	2,	6	24.00		320.00
JUL 1'64					14.00	306.00
JUL 5'64					8.00	298.00
JUL 9'64					8.00	290.00
OCT 15'64	3,	2,	1	5.00		295.00
OCT 17'64	3,	2,	1	3.00		298.00
OCT 24'64	2,	4,	1	5.00		303.00

DOCTOR CODE
1 Dr. J. Nicholson
2 Dr. John E. Foster
3 Dr. R. A. Rowe
4 Dr. _____

SERVICE RENDERED CODE
1 Office Visit
2 Injection
3 Complete Exam
4 House Call
5 Night Call
6 Hospital Care
7 Surgery
8 X-Ray
9 EKG
10 Physiotherapy
11 Orthopedic Care of Cast
12 Laboratory
13 VA or VB
14 Emergency Room

Pay Last Amount in This Column

61 700

STATEMENT

MEDICAL ARTS CENTER

P. O. DRAWER 1 B
FOLEY, ALABAMA

FAMILY CODE:
1 Lucius
2 Helen
3 Jane
4 Ralph
5 Henry L.
6
7
8

Mr. Lucius H. McKibbon.
Gen. Del.
Foley, Ala.

NUMBER:
1 20091
2 19028
3 18736
4 19227
5 20827
6
7
8

DATE	CODE Doctor	Family	Service	CHARGES	CREDITS	BALANCE
BALANCE FORWARDED					NOV 6'62	116.00
NOV 21'62	3,	3,	1	5.00		121.00
NOV 21'62	3,	4,	1	5.00		126.00
NOV 21'62					12.00	114.00
NOV 26'62	2,	3,	1	6.00		120.00
NOV 26'62	3,	3,	1	5.00		125.00
NOV 30'62	3,	3,	1	4.00		129.00
DEC 6'62	2,	4,	8	10.00		139.00
DEC 6'62	2,	1,	1	15.00		154.00
DEC 7'62	2,	1,	1	6.00		160.00
DEC 8'62	2,	1,	1	4.00		164.00
DEC 10'62	2,	1,	1	3.00		167.00
DEC 19'62	2,	1,	1	3.00		170.00
MAR 1'63	3,	3,	1	5.00		175.00
MAR 1'63					10.00	165.00
MAR 11'63		5,	2	3.00		168.00
MAR 26'63	3,	2,	1	7.00		175.00
MAR 26'63	3,	3,	1	5.00		180.00
MAR 27'63	2,	4,	1	4.00		184.00
MAR 28'63	2,	4,	1	4.00		188.00
APR 2'63	3,	1,	1	4.00		192.00
APR 3'63	3,	1,	1	6.00		198.00
SEP 4'63	2,	4,	1	3.00		201.00
SEP 16'63	2,	4,	1	3.00		204.00
NOV 6'63	2,	2,	1	4.00		208.00

DOCTOR CODE
1 Dr. J. Michaelson
2 Dr. John E. Foster
3 Dr. R. A. Rowe
4 Dr. Williamson

SERVICE RENDERED CODE
1 Office Visit
2 Injection
3 Complete Exam
4 House Call
5 Night Call
6 Hospital Care
7 Surgery
8 X-Ray
9 EKG
10 Physiotherapy
11 Orthopedic Care or Cast
12 Laboratory
13 VA or PH
14 Emergency Room

Pay Last Amount in this Column

61 VOL PAGE 791

NAME

ADDRESS

CITY

Mr. Lucius H. McKibbon
Com. Del.
Foley, Alabama

FAMILY (

1. Lucius	NO. 20091	5. Henry Loyd	NO. 20827
2. Helen	NO. 19020	6.	NO.
3. Jane	NO. 16736	7.	NO.
4. Ralph	NO. 19227	8.	NO.

DATE	CODE: DOCTOR	CODE: FAMILY	CODE: SERVICE	CHARGES	✓	CREDITS	✓	BALANCE
BALANCE FORWARDED						MAY 1962		112.00
MAY 28'62			05			35.00		77.00
JUNE 5'62			401			30.00		47.00
JUNE 25'62	2,	2,	1	6.00				53.00
JUNE 26'62		2,	2	3.00				56.00
AUG 2'62	2,	3,	1	3.00				59.00
SEP 15'62	2,	4,	1	4.00				63.00
SEP 15'62						10.00		53.00
OCT 9'62	3,	3,	1	4.00				57.00
OCT 10'62	2,	2,	6	20.00				77.00
OCT 15'62	2,	2,	1	5.00				82.00
OCT 15'62	2,	4,	1	2.00				84.00
OCT 16'62		2,	3	3.00				87.00
OCT 17'62	2,	2,	1	4.00				91.00
OCT 24'62	2,	3,	11	29.00				120.00

VOL 61 PAGE 792

STATE OF Alabama

COUNTY OF Baldwin

Personally appeared before me, the undersigned authority, in and for said County and State, B.H. Silvernell, who after first being duly sworn deposes and says that he is the Owner of the AAA Assignment Service and as such officer he has the supervision and custody of all the records of the said AAA Assignment Service including the accounts. Affiant further says that on the 21 day of January, 1969, that Lucius H. McKibben was indebted to said AAA Assignment Service in the amount of $554.00. Further that this indebtedness is still due and unpaid.

B.H. Silvernell

Sworn to and subscribed before me this 28 day of March, 1969.

Mary W. Fulford

Notary Public, State at Large

My commission expires 6/30/71

STATE OF Alabama

COUNTY OF Baldwin

Personally appeared before me, the undersigned authority, in and for said County and State, Daniela Blackwell, who after first being duly sworn deposes and says that she is the bookkeeper of the Medical Arts Center and as such officer he has the supervision and custody of all the records of the said Medical Arts Center including the accounts. Affiant further says that on the 1 day of December, 1967, that Lucius H. McKibbon was indebted to said Medical Arts Center in the amount of $ 754.00. Further that this indebtedness is still due and unpaid.

Daniela L. Blackwell

Sworn to and subscribed before me this 28 day of March, 1969.

Notary Public, State at Large
My commission expires Aug. 5, 1972

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 Lucius H. McKibbon

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.....

Lucius H. McKibbon, Defendant.....

by Burton H. Silverstein, d/b/a AAA Assignment Service, as Assignee of Drs. John E. Foster and Julius, Plaintiff.....

Witness my hand this 10 day of April 1969.

Alice J. Luck, Clerk

E/14-12-69

No. 8647 Page.....

STATE OF ALABAMA

Baldwin County

CIRCUIT COURT

Burton H. Silverstein, d/b/a AAA Assignment as Assignee of Drs. John E. Foster and Julius Michaelson Plaintiffs

vs.

Lucius H. McKibbon

Defendants

SUMMONS AND COMPLAINT

Filed FILED 19.....

APR 10 1969 Clerk

ALICE J. DUCK CLERK REGISTER

WILTERS, BRANTLEY & NESBIT

BY:

Plaintiff's Attorney

Defendant's Attorney

Defendant lives at
East end of Viaduct on Hwy 90 of Robertsdale - lives in a trailer

Received In Office

..... 19.....

..... Sheriff

I have executed this summons

this 12 - April 19 69

by leaving a copy with

x Mrs. L. H. McKibbon

Sheriff claims 50 miles at

Ten Cents per mile Total $ 5.00

by TAYLOR WILKINS, Sheriff

BY H. J. Brown DEPUTY SHERIFF

Taylor Wilkins Sheriff

H. J. Brown Deputy Sheriff

50 miles R. T.