

Certification of Satisfactory Assurances

As required by the Standards for Privacy of Individually Identifiable Health Information ("Privacy Regulations") promulgated pursuant to the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), this certification provides satisfactory assurance that appropriate steps have been taken to notify and/or otherwise protect the privacy of the individual who is the subject of the protected health information that is being requested.

Records will be used for Litigation only and kept according to State Law.

In compliance with 45 C.F.R. § 164.512(e)(1). I hereby certify that I have made a good faith attempt to provide written notice to _____, whose protected health information I am requesting, or if the individual's location is unknown, to mail a notice to the individual's last known address or legal representative at:

Name: _____

Street Address: _____

City, State, Zip: _____

A copy of such written notice is attached to this Certification.

I certify that the notice included sufficient information about the litigation or proceeding in which the protected health information is requested to permit the individual to raise an objection to the court or administrative tribunal.

Further, I certify that the time for the individual to raise objections to the court or administrative tribunal has elapsed and either: (1) no objections were filed; or (2) all objections filed by the individual have been resolved by the court or the administrative tribunal and the disclosures being sought are consistent with such resolution.

Name: _____ Date: _____

Signature: _____ Company _____