

Required Information and Fees for Legal Billing Records Request

Please note: We must receive this completed form and payment in order to process requests for legal billing records. To check the status of your request, please email UTPLegalBilling@uth.tmc.edu.

- Please allow 30 business days (from date received by UT Physicians) of this form and payment.
- If no records are found, an affidavit of no records will be provided.
- Fees are nonrefundable.
- No rush requests are offered at this time.
- If medical records are needed, please visit UTPhysicians.com/medical-records for more information.

Fees and payment information

- \$25 – Billing records
- \$15 – Affidavits
- \$15 – Questions per set (direct, redirect, and cross questions)

Address information

Mail payment fee and this completed form to:

UT Physicians Affidavit & Subpoena Department
1851 Crosspoint Ave, Suite 2.190
Houston, TX 77054

All requests must include the following for processing:

CLIENT/PATIENT NAME: _____

Patient's Date of Birth: ____/____/____ and/or Patient's Account MRN/Number(s): _____

Dates of Service Requesting: Any and All From ____/____/____ to ____/____/____

Patient Authorization (or) Statement of Assurance

Letter of Representation from Attorney (or) Letter from Attorney Authorizing Record Service to Obtain Billing Records

Prepayment * **must receive prepayment and request to be valid for processing** *