

Affidavit of Custodian of Record*Pursuant to California Evidence Code 1561 and Business and Professions Code 22462***Records Requested From:**
(Company Name and Address)_____

_____**Records Pertain To:****Records Subject:** _____
Date of Birth: _____
AKA: _____**CERTIFICATION OF RECORDS COPIED****Records Requested**
(provide explanation):

- a. All of the original records described in the Signed Authorization with which I was served have been provided to an Agent of Republic Document Management for the purpose of copying pursuant to Evidence Code 1560.
- b. The records were prepared in the ordinary course of business, by personnel of said business for which I am the custodian of records, at or near the time of the acts, conditions or events referenced therein.
- c. The following could not be provided with the attached list of documents for the following reasons:

_____**CERTIFICATION OF NO RECORDS****Records Requested**
(provide explanation):

After a thorough search has been made for the requested records, we hereby certify that the requested records have not been located.

- Patient was not treated
- Films were not taken
- Records do not exist for dates requested
- Records destroyed
- Records lost
- Applicant was not employed
- Claim records do not exist
- Other (please explain):
- Records are located at (please specify):

I, the undersigned, am the duly authorized custodian of records for Kaiser Permanente Northern California. I have authority to certify the records sought by the Signed Authorization. I hereby declare, under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on (date): _____ At (City and State): _____

Printed Name: _____

Signature: _____