



Recupera Records
185 Great Neck Rd
Great Neck, NY 11021
Tel: (212) 213-6659

FACSIMILE TRANSMITAL SHEET

TO: Records Custodian	FROM:
COMPANY: Acadian Pipe Testing, Inc.	DATE: November 21st, 2025
PHONE NUMBER:	RECORDS OF: Juan Ochoa
FAX NUMBER:	SENDER REFERENCE NUMBER: 1184

RE:

--	--

Thank You,
Recupera Records
Great Neck, NY 11021
Phone: (212) 213-6659
Fax: (212) 213-1715



Acadian Pipe Testing, Inc.
Route 2, Box 628
Church Point, LA 70525

Recupera #: 1184

Invoice



Invoice number TA8ADHEE-0003
Date of issue October 30, 2025
Date due October 30, 2025

OpenAI, LLC
548 Market Street
PMB 97273
San Francisco, California 94104-5401
United States
ar@openai.com

Bill to
Joseph Perri
7 Thrush Drive
Smithtown, New York 11787
United States
joeperri89@gmail.com


\$217.50 USD due October 30, 2025

[Pay online](#)

Description	Qty	Unit price	Tax	Amount
ChatGPT Pro Subscription (per seat) Oct 30 – Nov 30, 2025	1	\$200.00	8.75%	\$200.00
Subtotal				\$200.00
Total excluding tax				\$200.00
Sales Tax - New York (8.75% on \$200.00)				\$17.50
Total				\$217.50
Amount due				\$217.50 USD

RECUPERERA

Secure. Accurate. On Time.



November 21st, 2025

To Whom It May Concern:

Please allow this correspondence to confirm that Perri Law LLP utilizes the services of **Recupera Record Services** to process authorizations on our behalf to obtain records indicated on the attached authorization.

Kindly honor the authorization releasing information to **Recupera Record Services** as if it were our office requesting the records.

PLEASE SEND ALL REQUESTS FOR PAYMENTS AND THE RECORDS TO:

**Recupera Record Services
Medical Records Retrieval
185 Great Neck Rd
Great Neck, NY 11021**

If you have any questions regarding this matter, please feel free to contact our office. Thank you for your courtesy and cooperation.

	<p>Very Truly Yours,</p> <p><u>/s/ Joel Davis</u> Perri Law LLP 7 Thrush Dr Smithtown, NY 11787</p>
--	---



CERTIFICATION OF SATISFACTORY ASSURANCE

Pursuant to 45 C.F.R. §16a.512(e)(1)

PATIENT: Juan Ochoa

DOB:

As required by the Standards for Privacy of Individually Identifiable Health Information ("Privacy Act") promulgated pursuant to the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), this certification provides satisfactory assurances 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.

Notice

In compliance with 45 C.F.R. §16a.512(e)(1), I hereby certify, that I have made a good faith attempt to provide written notice to Juan Ochoa the individual, or if the individual's location is unknown, to make a notice to the individual's last known address or legal representation.

Name: _____
Street Address: _____
City, State, ZipCode: _____

A copy of such notice is attached to this Certification

I further 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 and objection to the court or administrative tribunal. I further 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.

(X) Qualified Protective Order

In compliance with 45 C.F.R. §16a.512(e)(1), I hereby certify that the parties to the dispute giving rise to this request for information have agreed to a qualified protective order and have presented it to the court or administrative tribunal with jurisdiction over the dispute. A copy of the qualified protective order, or my request for such order, is attached hereto.

Joel Davis
Name

November 21st, 2025
Date

/s/ Joel Davis
Signature

Perri Law LLP
Company



PROOF

recuperars.com

Joseph Perri

Regional Sales Manager

Recupera Record Retrieval Services LLC



EMAIL

Joseph.Perri@recuperars.com

CELL

[\(631\) 987-2167](tel:(631)987-2167)

OFFICE

[\(212\) 580-1191](tel:(212)580-1191)

FAX

[\(212\) 213-1715](tel:(212)213-1715)

WEB

recuperars.com

ADDRESS

[40 Wall Street, Suite 2855 | New York, NY 10005](#)

