



KOSA Acupuncture LLC
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IRREVOCABLE LIEN AND LETTER OF PROTECTION

Patient: _____ Date of Accident: _____

I. PATIENT'S IRREVOCABLE ASSIGNMENT AND AUTHORIZATION

I hereby authorize KOSA Acupuncture (the "Provider") to furnish my attorney with a full report of my examination, diagnosis, treatment, and prognosis regarding the accident in which I was involved.

I hereby **irrevocably authorize and direct** my attorney to pay directly to the Provider such sums as may be due and owing for professional services rendered, and to withhold such sums from any settlement, judgment, or verdict as may be necessary to adequately protect and fully compensate the Provider. I hereby give a **Lien** on my case to said Provider against any and all proceeds of my settlement, judgment, or verdict which may be paid to me or my attorney.

I understand that I remain personally and fully responsible for all medical bills submitted by the Provider. This agreement is made solely for the Provider's additional protection and in consideration of awaiting payment. I understand that payment to the Provider is not contingent on any settlement, judgment, or verdict. If my case is lost or dropped, I agree to pay the balance immediately.

I agree to promptly notify the Provider of any change of attorney, and I instruct my attorney to do the same and to deliver a copy of this lien to any substituted attorney.

 DATED

 PATIENT'S SIGNATURE

II. ATTORNEY'S ACKNOWLEDGMENT AND AGREEMENT

The undersigned, being the attorney of record for the above patient, hereby acknowledges receipt of this Lien and Letter of Protection. I agree to:

1. **Withhold** sufficient funds from any settlement, judgment, or verdict to pay the Provider in full **before** distributing proceeds to the client.
2. **Pay** the Provider directly and immediately upon receipt of cleared funds.
3. **Honor** this lien regardless of any subsequent instructions from the client to the contrary.

In the event this lien is litigated, the prevailing party shall be awarded attorney fees and costs.

 DATED

 ATTORNEY'S SIGNATURE