

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

* You may refuse to sign this acknowledgement

(Please check) I have received a copy of this office's Notice of Privacy Practices.

Please print name

Signature

Date

FOR OFFICE USE ONLY
We attempted to obtain written acknowledgement of receipt of our Notice of Privacy Practices, but acknowledgement could not be obtained because:
<input type="checkbox"/> Individual refused to sign
<input type="checkbox"/> Communication barriers prohibited obtaining the acknowledgement
<input type="checkbox"/> An emergency situation prevented us from obtaining acknowledgement
<input type="checkbox"/> Other (Please Specify)

