

## **ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES**

\*You may refuse to sign this form\*

l,	, have received a copy of the Notice of Privacy Practices.
	Please Print Name:
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	Date:
	For Office Use Only:
	ttempted to obtain written acknowledgement of receipt of our Notice of Privacy Practices, but the owledgement could not be obtained because:
	Individual refused to sign
	Communication barriers prohibited obtaining the acknowledgement
	An emergency situation prevented us from obtaining the acknowledgement
	Other (please specify)