



ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

YOU MAY REFUSE TO SIGN THIS ACKNOWLEDGEMENT

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:

_____ INDIVIDUAL REFUSED TO SIGN

_____ COMMUNICATION BARRIERS PROHIBITED OBTAINING THE
ACKNOWLEDGEMENT

_____ AN EMERGENCY SITUATION PREVENTED US FROM OBTAINING
ACKNOWLEDGEMENT

_____ OTHER (PLEASE SPECIFY)

