



## Acknowledgement of Receipt of Notice of Privacy Practices

**Purpose:** This form is used to obtain acknowledgement of receipt of our Notice of Privacy Practices or to document our good faith effort to obtain that acknowledgement.

**You May Refuse to Sign This Acknowledgement**	
I,	, have received a copy of this office's Notice of
Privacy Practices.	
Please Print Name	
r icase i init ivame	
Signature	
Date	
	For Office Use Only
We attempted to obtain written acknow acknowledgement could not be obtaine	ledgement of receipt of our Notice of Privacy Practices, but d because:
□ Individual refused to sign	
<ul> <li>Communications barriers pro</li> </ul>	hibited obtaining the acknowledgement
	ented us from obtaining acknowledgement
□ Other (Please Specify)	