



Acknowledgement of Receipt of Privacy Practices

You may refuse to sign this acknowledgement

**I, _____, have received a copy of
this office's Privacy Practices.**

PLEASE PRINT NAME

SIGNATURE

DATE

FOR OFFICE USE ONLY

We attempted to obtain written acknowledgement of receipt of our Privacy Practices, but acknowledgement could not be obtained because:

- Individual refused to sign
- Communications barriers prohibited obtaining the acknowledgement
- An emergency situation prevented us from obtaining acknowledgement
- Other (please specify below)

