## ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

I,	, have received a co	opy of this office's
	Notice of Privacy Practices.	
	Please Print Name	_
	Signature	_
	Date	
	FOR OFFICE USE ONLY	
	d to obtain written acknowledge of Privacy Practices, but acknow not be obtained because: □Individual refused to sign	ledgement could
□Communio	cations barriers prohibited the a	acknowledgement
⊡An eme	ergency situation prevented us f acknowledgement	rom obtaining
	□Other (Please Specify)	
		- 10 Tests