{Name of Practice}

Acknowledgement of Receipt of Notice of Privacy Practices

* You May Refuse to Sign This Acknowledgment*

I, of Privacy	, have received a copy of this office's Notice Practices.
Print Nam	e
	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
•	Communications barriers prohibited obtaining the acknowledgement
•	An emergency situation prevented us from obtaining acknowledgement
•	Other (Please Specify)

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