



Acknowledgement of Receipt of Privacy Practices Policy

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

I would like to receive telephone communication or messages via: (Check all that apply)

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Pager: _____

Signature

Date

FOR OFFICE USE ONLY

We attempted to obtain written acknowledgement of receipt of our notice of Privacy Practices, but the 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: _____

Practitioner

Date