

Dr. Erin Cox

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

***** You may refuse to sign this Acknowledgement *****

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

Print Name

Signature

Date

For Office Use Only

We attempted to obtain written Acknowledgment of Receipt of our Notice of Privacy Practices, but acknowledgement could not be obtained because

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