



**ACHNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES**

I \_\_\_\_\_, have received a copy of this office's Notice of Privacy Practices.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please check appropriate boxes to indicate where we may leave messages if we do not talk to you personally.

Work:

\_\_\_\_\_ Co-Worker  
\_\_\_\_\_ Recorder

Home:

\_\_\_\_\_ Other family members  
\_\_\_\_\_ Recorder  
\_\_\_\_\_ Cell Phone

**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 obtaining the acknowledgement  
\_\_\_\_\_ Other Photographs  
\_\_\_\_\_ Self  
\_\_\_\_\_ Family

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