

ACKNOWLEDGEMENT OF RECEIPT OF PRIVACY PRACTICES

You may refuse to sign this Acknowledgement

I,	I,, have received a copy of this office's No	tice of
P	Privacy Practices.	01
>		
×	(PLEASE PRINT NAME)	PROPERTY OF THE STATE OF THE ST
>	(SIGNATURE) (DATE)	
**		
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:		
0	O Individual refused to sign	
0	O Communications barriers prohibited obtaining the acknowledgement	
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