

**ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES**

**\*YOU MAY REFUSE TO SIGN THIS ACKNOWLEDGEMENT\***

I have received a copy of Dr. John Ringo's Dental Office Notice of Privacy Practices

Print name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**For Office Use Only**

We attempted to obtain written acknowledgement 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