

## **Weber Behavioral Health**

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### ***ACKNOWLEDGMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES***

**\*\*You May Refuse to Sign This Acknowledgment\*\***

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

\_\_\_\_\_  
(Please Print Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

**For Office Use Only**

We attempted to obtain written **ACKNOWLEDGMENT** of receipt of our Notice of Privacy Practices, but **ACKNOWLEDGMENT** could not be obtained because:

- Individual refused to sign
- Communications barriers prohibited obtaining the **ACKNOWLEDGMENT**
- An emergency situation prevented us from obtaining  
**ACKNOWLEDGMENT**
- Other (Please Specify) \_\_\_\_\_

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