COUNTY OF OTTAWA

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

You May Refuse to Sign This Acknowledgement

I,		, have received a copy of the Ottawa County
Notice of	of Priva	acy Practices.
-		Please Print Name
-		Signature
-		Date
		For Office Use Only
		to obtain written acknowledgement of receipt of our Notice of Privacy Practices, gement could not be obtained because:
		Individual refused to sign
		Communications barriers prohibited obtaining the acknowledgement
		An emergency situation prevented us from obtaining acknowledgement
		Other (Please Specify)
-		
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		County of Ottawa By: