



(Electronic Signature Pad Form)

Acknowledgement of Receipt of Notice of Privacy Practices

You may refuse to sign this acknowledgement.

Part A: I have received a copy of the Ramsey County Notice of Privacy Practices (NPP):

Please print client name

Client signature (or signature of receiver)

Relationship (if receiving this notice on behalf of client)

Date of receipt

Part B: Following check-box area for office use only.

We attempted to obtain written acknowledgement of receipt of our Ramsey County Notice of Privacy Practices (NPP), but acknowledgement could not be obtained because:

Individual refused to sign.

Communication barriers prohibited obtaining the acknowledgement.

An emergency situation prevented us from obtaining an acknowledgement.

Other (Please specify):

Part C: This shaded area for Ramsey County Community Human Service clients only.

I have received a copy of and authorize the Ramsey County Community Human Services addendum:

Addendum A RCW 4010	Client/Representative Signature	Date
Addendum B RCW 4011	Client/Representative Signature	Date

Part D: This signed form must be placed in the client file; or reason checked for unsigned.

Worker Initials/#	
------------------------------	--