

**S.E.E.D.S. of the Willistons Inc.**  
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129A Hillside Avenue  
Williston Park, NY 11596

## **Acknowledgement of Notice of Notice of Privacy**

### **You May Refuse To Sign This Acknowledgement**

**I have received a copy to read, of this office's Notice of Privacy Practices and have been given the opportunity to review it.**

**Name: Please Print** \_\_\_\_\_

**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:**

- Individual refused to sign**
- Communications barriers prohibited obtaining the acknowledgement**
- An emergency situation prevented us from obtaining the acknowledgement**
- Other (Please specify below)**

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\_\_\_\_\_  
\_\_\_\_\_

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**Signature of Office Personnel**