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## Acknowledgment of Receipt of Notice of Privacy Practices

You may refuse to sign this acknowledgment.

I, \_\_\_\_\_ have received a copy of  
7 Peaks Dental's Notice of Privacy Practices.

Printed Name: \_\_\_\_\_

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

Today's Date: \_\_\_\_\_

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### 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

Communication barriers prohibited obtaining

An emergency situation prevented obtaining