

Life Matters Counseling
Kelley Nay, M.S., LMFTA
(425) 681-9272

1611 – 116th Ave. NE, Ste 100
Bellevue, WA 98004
(425) 458-9331 fax

Acknowledgement of Receipt of the HIPAA Notice of Privacy Practices

Federal law requires that we obtain your written acknowledgement of receipt of the Notice of Privacy Practices. Please sign or initial below.

I acknowledge that I have received the Notice of Privacy Practices.

Client Name(s)	Client Signature(s)	Date(s) of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Legal Representative Name (if client unable to sign)

Legal Representative Signature

Date
