

BELLEVUE · COMMONS  
**E**NDODONTIC**S**

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**ACKNOWLEDGEMENT OF RECEIPT OF  
NOTICE OF PRIVACY PRACTICES**

(You May Refuse to Sign This Acknowledgement)

I have received, or been provided with a copy of the  
**Notice of Privacy Practices for Bellevue Commons Endodontics**

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

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

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We attempted to obtain written acknowledgement of receipt of our Notice of Privacy Practices, but acknowledgement could not be obtained because: (circle what applies)

Individual refused to sign

Communication barriers prohibited obtaining the acknowledgement

An emergency situation prevented us from obtaining acknowledgement

Other (Please specify)

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