

Robert Clapcich, DMD

116 Millburn Avenue, #113  
Millburn, NJ 07041  
(973)379-2525  
Fax (973)379-2014

*"Creating healthy, beautiful smiles....for a lifetime."*

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**ACKNOWLEDGMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES**

**\*\* You May Refuse to Sign This Acknowledgment \*\***

The undersigned acknowledges receipt of a copy of the currently effective Notice of Privacy Practices for Robert Clapcich, DMD. A copy of this signed, dated Acknowledgment shall be as effective as the original.

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Please print your name

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Please sign your name

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Date of your signature

If you are the legal representative of the patient, please print the patients' name(s) and describe your authority

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Thank you and if you have any questions about this form or the attached Notice, please contact our privacy officer, at:

Privacy Officer for Robert Clapcich, DMD  
116 Millburn Avenue, #113  
Millburn, NJ 07041  
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Fax (973)379-2014

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**Office Use Only**

As privacy officer, I attempted to obtain the patient's (or representative's) signature on this Acknowledgment but did not because:

It was emergency treatment	_____
I could not communicate with the patient	_____
The patient refused to sign	_____
The patient was unable to sign because	_____
Other (please describe)	_____

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Signature of privacy officer