Noema Counseling, LLC

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Acknowledgement of Notice of Privacy Practices.

I hereby acknowledge that I was given the opportunity to read and receive a copy of the Notice of Privacy Practices. These can also be read at:

<http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveredentities/notice.html>

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Signature of Client Date

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Printed Name Date

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Noema Counseling Staff Signature Date