

Terasa L. Davis, Psy.D., PC

Notice of Privacy Practices - Acknowledgment

**300 Towncenter Blvd
Suite C
Tuscaloosa, Al 35406
(205) 391-9777
Fax (205) 391-9766**

I, _____, have been made aware of the Privacy Practices
for this office and understand I may receive a copy of the HIPPA Guidelines upon request.

Signature Date

FOR PERSONS WITH A LEGAL REPRESENTATIVE

Representative's Signature Date

Relationship of Signee

Witness Signature Date