

Putnam Parkway Eyecare  
102 Putnam Parkway Suite B  
Ottawa, OH 45875  
Phone: (419) 523-3937  
Fax: (419) 523-3944

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**Acknowledgement Of Privacy Practices**

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Date \_\_\_\_\_

I, \_\_\_\_\_ acknowledge that I have received a copy of the Notice of Privacy Practices from Putnam Parkway Eyecare.

I have listed individuals that are authorized to receive my protected health information. I am aware that I can revoke the authorization for any individual at any time, but must do so in writing.

\_\_\_\_\_  
Signature of Patient

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Patient Representative & Relationship  
(Required if patient is a minor or an adult unable to sign form)

\_\_\_\_\_  
Date

**The following individuals have my authorization to access my Protected Health Information**

\_\_\_\_\_  
Name Relationship Phone

\_\_\_\_\_  
Name Relationship Phone

\_\_\_\_\_  
Name Relationship Phone

\_\_\_\_\_  
Name Relationship Phone