

*Treasure Coast
Surgical Center, Inc.*
1811 S. 25th Street • Fort Pierce, FL 34947
(772) 467-1960

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

I have received a copy of the Privacy Notice with the effective date of **March 19, 2005**.

Signature of Patient or Personal Representative

Date

Name of Patient or Personal Representative

Date

May we leave results on answering machine or voice mail YES NO