

**David A. Yates & Associates, Inc. d/b/a**  
Jonesboro Prosthetic & Orthotic Laboratory (JP&O)  
JP&O Prosthetic & Orthotic Laboratory (JP&O)

**Acknowledgment of Receipt of Notice of Privacy Practices**

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Signature of Patient or Personal Representative

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**Print Name** of Patient or Personal Representative

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Date

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Description of Personal Representative's Authority