**Pinner Clinic, PA**

*A Rich History of Medical Tradition Since 1915*

**Carroll A. Pinner, III, MD Benjamin C. Pinner, MD Lori Turner, APRN Kelsey Rutter, APRN**

**Receipt of Notice of Privacy Practices**

I hereby acknowledge that I have been given a copy of Pinner Clinic’s Notice of Privacy Practices, and further understand that any questions may be directed to the Privacy Officer/Practice Administer at Pinner Clinic.

Patient Printed Name

Patient Signature

Date