

**PLANNED PARENTHOOD OF SOUTH CENTRAL MICHIGAN**

4201 W. Michigan Ave.  
Kalamazoo, MI 49006  
269/372-1200

693 Capital Ave. NW  
Battle Creek, MI 49015  
269/964-0885

**ACKNOWLEDGMENT OF RECEIPT OF NOTICE OF HEALTH INFORMATION  
PRIVACY PRACTICES**

**I HEREBY ACKNOWLEDGE** receipt of Planned Parenthood of South Central Michigan's NOTICE OF HEALTH INFORMATION PRIVACY PRACTICES. Please print your name, sign and date as indicated below:

Name: \_\_\_\_\_  
(please print)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

(A copy of this acknowledgment will be kept in your patient file.)