Steere Family Therapy 8013 Brownsboro Road

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HIPPA PRIVACY NOTICE ACKNOWLEDGEMENT OF RECIEPT AND REVIEW

This is to acknowledge I have reviewed the HII Steere Family Therapy.	PPA Privacy Notice provided to me by
Client Name (please print)	Date
Name and the relationship of person you author Information)	rize to have PHI (Private Health
Signature of individual or legal guardian	