

CyMa B. Wilson, Psy.D.

3660 Waialae Ave., Suite 208
Honolulu, Hawaii 96816

Mobile: 808.256.6518
Toll-free fax: 888.528.0731
cyma@cymawilson.com

ACKNOWLEDGMENT OF RECEIPT OF NOTICE

I hereby acknowledge that I have received a copy of the **Notice of Privacy Policies and Practices** as required by the Health Insurance Portability and Accountability Act (HIPAA). I also hereby acknowledge that I have read the **Psychologist-Patient Services Agreement**.

Patient Name (please print)

Patient Signature

Date