

James T. Jesse, D.D.S., INC.
328 E. Commercial Road, Suite 104
San Bernardino, CA 92354

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF THE FACTS ABOUT FILLINGS

You May Refuse to Sign This Acknowledgement

I, _____, have received a copy of this
office's Notice of the Facts About Fillings.

Date

Signature

FOR OFFICE USE ONLY

We attempted to obtain written acknowledgement of receipt of our Notice of the Facts About Fillings, but acknowledgement could not be obtained because:

- Individual refused to sign
- Communication barriers prohibited obtaining the acknowledgement
- An emergency situation prevented us from obtaining acknowledgement
- Other _____