
ACKNOWLEDGEMENT OF RECEIPT OF Dental Material Fact Sheet

****You May Refuse to Sign This Acknowledgement****

I, _____, have received a copy of this office's Dental Material Fact Sheet

{Please Print Name}

{Signature}

{Date}

For Office Use Only

We attempted to obtain written acknowledgement of receipt of our Dental Material Fact Sheet, but acknowledgement could not be obtained because:

- Individual refused to sign
- Communications barriers prohibited obtaining the acknowledgement
- An emergency situation prevented us from obtaining acknowledgement
- Other (Please Specify)
