

## **ACCOUNTING OF DISCLOSURES: EXTENSION NOTIFICATION**

[Date]		
[Patient Name] [Street Address 1] [Street Address 2]		
[City, State Zip Code]		
Re: Request For Accounting of	of Disclosures	
Dear [Patient Name]:		
This letter responds to your refrom you on	equest for an accounting of disclosu	ures, which we received
usually able to provide an accunusual difficulties retrieving	to produce the accounting you had counting of disclosures within 60 the information for the accounting to fulfill your request. We expect	days. However, due to that you have requested
Please contact questions or concerns about the	at the phone number ofis delay.	if you have
Sincerely,		
University Physicians of Brool	klyn, Inc.	