# Accounting of Disclosures Log

**Notice: Check with Legal Counsel (405-271-2033) or the Privacy Official (405-271-2033) prior to making any non-routine disclosures.**

Member Name: _____ Date of Birth: _____

Member ID #: _____

| Date of Disclosure | Name and Address (if known) of Entity Receiving Protected Health Information (PHI) | Description of PHI Disclosed | Statement of Purpose of Disclosure |
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