



HAWAII HEALTH SYSTEMS
C O R P O R A T I O N
Quality Healthcare for All

CODE OF CONDUCT

Policies and Procedures

Issued by: Corporate Compliance Committee

Approved by: Alice M. Hall, Esq.
Interim President and CEO

Approved by: Hawaii Health Systems Corporation (“HHSC”)
Board of Directors

Date: December 9, 2010

STANDARDS OF CONDUCT

Patient Relationships

We are committed to providing a high quality of healthcare and services to address the needs of our patients, their families, visitors and the community. We treat all patients in a manner that preserves their dignity, autonomy, and involvement in their own care.

General Legal and Regulatory Compliance

HHSC will continuously and vigorously promote full compliance with applicable federal and state laws and regulations, and federal health care program requirements.

Avoidance of Conflicts of Interest

Employees, management, Board members, Medical Staff and agents maintain a duty of loyalty to HHSC and, as a result, must avoid any activities or private interests that may influence or appear to influence the employee, manager, director, member of the Medical Staff or agent's ability to render objective decisions in the course of his or her job responsibilities, or other services he or she furnishes to HHSC.

Relationship with Payors

HHSC will consistently strive to satisfy accurate billing to government payors, commercial insurance payors, and patients with which HHSC transacts business.

Relationship with Physicians and Other Healthcare Providers

HHSC will monitor its business dealings to structure relationships with physicians and other healthcare providers consistent with relevant federal and state laws and regulations, and in furtherance of HHSC's mission.

Work Environment

We recognize that a diverse workforce and safe work environment enriches the life experience of all employees and our community, and HHSC will continue to maintain this culture.

Information and Information Systems

We recognize that the provision of healthcare services generates business, financial, and patient-related information that requires special protection. We will establish systems that ensure such information is used appropriately and properly safeguarded.

I. PURPOSE:

To implement the Hawaii Health Systems Corporation (HHSC) code of Conduct.

II. POLICY:

This Code of Conduct is a summary of the ethical and legal standards by which HHSC employees management, Board of Directors (Board or Board members), members of the Medical Staff (Medical Staff) and agents will conduct themselves to protect and promote system-wide integrity and to enhance HHSC's mission. The Code of Conduct should be used as a guide to help HHSC's employees, management, Board members, Medical Staff and agents make sound decisions in carrying out their day to day responsibilities. The Code of Conduct cannot possibly address all legal and ethical standards applicable to HHSC; therefore, policies and procedures applicable to specific legal and ethical standards shall supplement the standards set forth in the Code. In addition, employees, management, Board members, Medical Staff and agents are expected to use good judgment in performing their responsibilities on behalf of HHSC.

III. DEFINITIONS*:

Agents with respect to HHSC shall mean all persons and entities that have contracted with or volunteer at HHSC to provide healthcare related services, equipment or other items that impact HHSC's provision of healthcare to patients, and HHSC's relationship with federal health care programs. Agents shall include, but not limited to, residents, medical students, contractors, consultants, volunteers and vendors.

Board or **Board member** shall mean the members of HHSC's Board of Directors, which consists of community volunteer leaders who are representatives of the total community, and are knowledgeable of Hawaii's unique cultural diversity and health needs.

Compliance Committee shall mean those employees responsible for providing direct support to the Chief Compliance and Privacy Officer (CCPO) in the reaction, implementation and operation of HHSC's Compliance Program.

Employees shall mean those individuals employed by HHSC including, but not limited to, civil service/exempt employees, managers, facility administrators, employed Medical Staff, and other healthcare professionals.

Excluded individuals and entities refers to an individual or entity who: (a) is currently excluded, debarred, suspended, or otherwise ineligible to participate in the Federal health care programs or in Federal procurement or non-procurement programs; or (b) has been convicted of a criminal offense that falls within the ambit of 42 U.S.C § 1320a-7(a), but has not yet been excluded, debarred, suspended, or otherwise declared ineligible.

Federal health care programs as defined in 42 U.S. C. Section 1320a-7b(f), include any plan or program that provides healthcare benefits to any individual, whether directly, through insurance, or otherwise, which is funded directly, in whole or in part, by a United States Government or state healthcare program, including, but not limited to, Medicare, Medicaid, Civil Health and Medical Program for the Uniformed Services (CHAMPUS), Department of Veterans Affairs (VA), Tricare Military Health Program (TRICARE), Federal Bureau of Prisons, and Indian Health Services, but excluding the Federal Employees Health Benefit Program (FEHBP).

HHSC shall include all healthcare facilities or services which are currently operated or provided by the Hawaii Health Systems Corporation, or which shall be operated or provided by the Hawaii Health Systems Corporation in future.

Management shall mean those HHSC employees who have the responsibility of evaluating, recommending and implementing major policies and strategies that promote the provision of quality healthcare to the communities which HHSC serves.

Medical Staff or **Member of the Medical Staff** shall mean those physicians and other providers of healthcare services who have been granted membership or clinical privileges to admit, treat or practice medicine within HHSC, and according to the terms of HHSC's Medical Staff Bylaws.

Monitoring refers to compliance reviews that are repeated on a regular basis during the normal course of HHSC's operations.

Noncompliance refers to conduct inconsistent with the goals of HHSC's Compliance Program or in violation of any criminal, civil or administrative law or regulation, or federal health care program requirements.

*For purposes of the Code of Conduct

IV. RESPONSIBILITIES UNDER THE CODE OF CONDUCT

A. Who must comply with HHSC's Code of Conduct?

This Code of Conduct applies to all employees, management, Board members, Medical Staff and agents affiliated with HHSC throughout HHSC's medical facilities, including: Hale Ho'ola Hamakua, Hilo Medical Center, Ka'u Hospital, Kauai Veterans Memorial Hospital, Kohala Hospital, Kona Community Hospital, Kula Hospital, Lanai Community Hospital, Leahi Hospital, Maluhia, Maui Memorial Medical Center, Samuel Mahelona Memorial Hospital and any other facilities or services which are currently operated or provided by HHSC, or which shall be operated or provided by HHSC in future (the HHSC facilities).

B. What are the responsibilities of each employee with regard to the Code of Conduct?

- Read the standards of conduct and think about their application to your work. You should have a basic understanding of issues covered by each standard and the supplemental compliance policies and procedures that apply to your job function.
- Seek assistance from your immediate supervisor or your region's compliance officer (RCO) when you have questions about the application of the standards and other HHSC policies to your work.
- Understand the options that HHSC makes available to you for raising conduct or ethical concerns and promptly raise such concerns. You should raise such concerns with your immediate supervisor or your RCO. If you are uncomfortable speaking with your immediate supervisor or RCO in your region, you should address your concerns with the Chief Compliance and Privacy Officer (CCPO). If you prefer to raise your concerns anonymously, HHSC has

established a telephone hotline **1-877-733-4189**, which is another source upon which you can rely.

- Cooperate in HHSC investigations concerning potential violations of law, the Code of Conduct, HHSC's Corporate Compliance Program (Compliance Program), and HHSC policies and procedures.

C. What are the responsibilities of HHSC management?

1. Build and maintain a culture of compliance by:

- Personally leading compliance efforts through frequent meetings that require compliance reports and regular monitoring of compliance matters and programs.
- Leading by example, using your own behavior as a model for all employees.
- Encouraging employees to raise conduct and ethical questions and concerns.
- Seeking assistance from the CCPO to address any questions or concerns for which you do not know the answer.
- Using employee actions and judgments in promoting and complying with the Code of Conduct and other HHSC policies as considerations when evaluating and rewarding employees.
- Ensuring the CCPO and the RCOs are equipped with the necessary resources to promote the effectiveness of the Compliance Program.

2. Prevent compliance issues by:

- Identifying compliance risks and proposing additional policies and procedures that may be appropriate to address such risks.
- Identifying employees whose activities involve issues covered by HHSC policies.

- Providing education and counseling to assist employees to understand the Code of Conduct, HHSC policies, and applicable law.

3. Detect compliance problems by:

- Implementing and maintaining appropriate controls to monitor compliance and mechanisms that foster the effective reporting of potential compliance issues.
- Promoting an environment that permits employees to raise concerns without fear of retaliation.
- Assisting in periodic compliance reviews that are conducted by the CCPO, the RCOs or external auditors, to assess the effectiveness of HHSC's compliance measures and to identify methods of improving internal controls.

4. Respond to compliance problems by:

- Pursuing prompt corrective action to address imperfections in compliance measures.
- Applying appropriate disciplinary action when necessary.
- Consulting with the CCPO and RCOs so that compliance issues are promptly and effectively addressed.

5. Report potential compliance issues by:

- Promptly raising conduct or ethical concerns with your immediate supervisor, your facility administrator or your RCO.
- If you are uncomfortable speaking with your immediate supervisor, facility administrator or RCO in your region, you should address your concerns with the CCPO.
- If you prefer to raise your concerns anonymously, HHSC has established a telephone hotline **1-877-733-4189**, which is another source upon which you can rely.

D. What are the responsibilities of HHSC Board members?

- Read the standards of conduct and think about their application to you.
- Make decisions that are in the best interest of HHSC and which are not affected by conflicts of interest.
- Receive and act upon advice from management, including the President and Chief Executive Officer (CEO), the CCPO and General Counsel
- Ensure that the Compliance Program is free from undue restraints and influences, and raise any compliance issues with the President and CEO or the CCPO.
- Maintain the confidentiality of all compliance-related information provided to you.

E. What are the responsibilities of the Medical Staff?

- Read the standards of conduct and think about their application to your work. You should have a basic understanding of issues covered by each standard and the supplemental compliance policies that apply to the services you furnish to HHSC and our patients.
- Actively participate in compliance activities as requested by your RCO, the CCPO and other HHSC administration.
- Assist HHSC in identifying compliance issues and in developing possible solutions to address those issues.
- Understand the various options that HHSC makes available to you for raising conduct or ethical concerns and promptly raise such concerns. You should raise such concerns with your RCO, your Regional Chief of Staff or the CCPO. If you prefer to raise your concerns anonymously, HHSC has established a telephone hotline **1-877-733-4189**, which is another resource upon which you can rely.

- Cooperate in HHSC investigations concerning potential violations of law, the Code of Conduct, HHSC's Compliance Program, and HHSC policies and procedures.

F What are the responsibilities of agents?

- Read the standards of conduct and think about their application to the services you furnish to HHSC. You should have a basic understanding of issues covered by each standard and the supplemental compliance policies that apply to the services you furnish to HHSC.
- Actively participate in compliance activities, such as education and training, as requested by HHSC.
- Understand the various options that HHSC makes available to you for raising conduct or ethical concerns and promptly raise such concerns. You should raise such concerns with the RCOs or the CCPO. If you prefer to raise your concerns anonymously, HHSC has established a telephone hotline **1-877-733-4189**, which is another resource upon which you can rely.
- Cooperate in HHSC investigations concerning potential violations of law, the Code of Conduct, HHSC's Compliance Program, and HHSC policies and procedures.

V. STANDARDS OF CONDUCT

A. Patient Relationships: We are committed to providing a high quality of healthcare and services to address the needs of our patients, their families, visitors and the community. We treat all patients in a manner that preserves their dignity, autonomy, and involvement in their own care.

Principles:

- We will recognize the right of our patients to receive quality services provided by competent individuals in an efficient, cost effective and safe manner.
- We will continually monitor the clinical quality of the services we provide and, as necessary, will endeavor to improve the quality of services provided.
- We will support every patient's right to be free from all types of abuse, and will not tolerate patient abuse in any form.
- We will apply our admission, treatment, transfer and discharge policies equally to all patients based upon identified patient needs, and such policies will be consistent with all legal requirements applicable to HHSC.
- We will listen to our patients, their families and visitors to understand any concerns or complaints.
- We will involve patients in the decision-making process about their care.
- We will provide treatment and medical services without discrimination based on race, color, age, religion, national origin, gender, sexual orientation or disability.
- We will complete emergency assessments, according to applicable legal requirements, for all who request our emergency

services, and not base an emergency assessment of the patient's ability to pay or any other discriminatory factor.

- We will provide our patients with only those services which are medically necessary and appropriate.
- We will maintain licensure and credentialing standards to promote the provision of clinical services by properly trained and experienced Medical Staff.
- We will perform thorough background checks of potential employees and other individuals involved in patient care at the HHSC facilities to verify credentials and to assess whether such individuals have ever been excluded from participation in any of the Federal health care programs, including the Medicare and Medicaid programs.
- We will respect the privacy of our patients, and we will treat all patient information with confidentiality, in accordance with all applicable laws, regulations and professional standards.

B. General Legal and Regulatory Compliance: HHSC will continuously and vigorously promote full compliance with applicable federal and state laws and regulations, and federal health care program requirements.

Principles:

- We will continuously study our legal obligations and create policies and procedures that facilitate compliance by our employees, management, Board members, Medical Staff and agents with such legal obligations.
- We will recognize the critical role of research in improving the health status of our community, and we are committed to conducting all research activities in compliance

with the highest ethical, moral, and legal standards.

- We will engage in open and fair competition and marketing practices based on the needs of our community and consistent with the furtherance of our mission.
- We will treat our employees with respect, and will engage in human relations practices that promote the personal and professional advancement of each employee.
- We will recognize that our employees work in a variety of situations and with a variety of materials, some of which may pose a risk of injury. We are committed to providing a safe work environment, and will implement and monitor policies and procedures for workplace safety that are designed to comply with federal and state safety laws, regulations, workplace safety directives, and applicable collective bargaining provisions.
- We will recognize that the provision of healthcare may in some instances produce hazardous waste products or other risks involving environmental impact. We are committed to compliance with applicable environmental laws and regulations, and will follow proper procedures with respect to handling and disposing of hazardous and biohazardous waste.
- We will require our employees, management, Medical Staff and agents to understand the basic legal obligations that pertain to their individual job functions or services they furnish to HHSC and our patients, and will require that they strive to make certain that their decisions and actions are conducted in conformity with such laws, regulations and policies and procedures.
- We will support educational and other training sessions to teach HHSC employees, management,

Board members and, as warranted, Medical Staff and agents, about the impact of the law on their duties, and to promote compliance with our collective legal obligations.

- We will support and maintain multiple resources for employees, management, Board members, Medical Staff and agents to voice any questions about the proper interpretation of a particular law, regulation or policy and procedure.

C. Avoidance of Conflicts of Interest: Employees, management, Board members, Medical Staff and agents maintain a duty of loyalty to HHSC and, as a result, must avoid any activities or private interests that may influence or appear to influence the employee, manager, director, member of the Medical Staff or agent's ability to render objective decisions in the course of his or her job responsibilities, or other services he or she furnishes to HHSC.

Principles:

- We will maintain policies and procedures that clarify scenarios in which an individual's private interests may inappropriately interfere with HHSC's interests, and will provide support through which employees, management, Board members, Medical Staff and agents may pose questions about whether a particular outside activity or relationship could be construed as a conflict of interest.
- We will articulate expectations of the conduct that must be demonstrated by employees, management, Board members, Medical Staff and agents in the performance of services for HHSC, and will require that such individuals remain free of conflicts of interest in the performance of their responsibilities and services to HHSC.
- We will require employees, management, Board members,

Medical Staff and agents to inform HHSC of personal business ventures and other activities that could be perceived as conflicts of interest.

- We will not permit employees, management, Board members, Medical Staff or agents to use any proprietary or non-public information acquired as a result of a relationship with HHSC for personal gain or for the benefit of another business opportunity.
- We will not permit the use of HHSC's resources, such as materials or equipment, for the pursuit of financial gain unrelated to HHSC's business.
- We will render decisions about the purchase of external goods and services based on objective criteria, such as the subcontractor's or supplier's ability to best satisfy HHSC's needs, and not based on personal relationships.

D. Relationship with Payors: HHSC will consistently strive to satisfy accurate billing to government payors, commercial insurance payors, and patients with which HHSC transacts business.

Principles:

- We will promote compliance with laws governing the submission and review of bills for our services and will deal with billing inquiries in an honest and forthright manner.
- We will implement reasonable measures to prevent the submission or filing of inaccurate, false or fraudulent claims to payors.
- We will utilize systematic methods for analyzing the payments we receive and will reconcile inaccurate payments after discovery.
- When warranted, we will investigate inaccurate billings and payments to determine whether

changes to current protocol or other remedial steps are necessary.

- We will implement documentation procedures sufficient to ensure physicians that treat patients in the HHSC facilities accurately and timely provide reliable documentation of the services rendered.
- We will review cost reports to be filed with the Federal health care programs to determine whether such reports accurately and completely reflect the operations and services provided to beneficiaries and to confirm that such reports are completed in accordance with applicable federal and state regulations and HHSC policies and procedures.
- We will, as necessary, rely on internal and external sources to help improve HHSC's billing and coding protocol and to identify potential areas of noncompliance.
- We will only compensate billing and coding staff and consultants for services rendered, and will not compensate such persons in any way related to collections or maximization of revenues.

E. Relationship with Physicians and Other Healthcare Providers: HHSC will monitor its business dealings to structure relationships with physicians and other healthcare providers consistent with relevant federal and state laws and regulations, and in furtherance of HHSC's mission.

Principles:

- We will accept patient referrals based on our ability to render appropriate healthcare services to the patient.
- We will treat referral sources fairly and consistently, and will not provide remuneration that could be considered payment for referrals, including:

- Free or below-market rents;
- Administrative or staff services at no- or below-cost;
- Grants in excess of actual amounts for bona fide research or other services rendered;
- Interest-free loans; or
- Gifts, “perks” or other payments intended to induce patient referrals.
- We will implement policies and procedures that require fair market value determinations for services rendered by referral sources and for services rendered by HHSC.
- We will require all agreements with referral sources to be reduced to writing and reviewed and approved by HHSC’s legal department.
- We will educate and train the appropriate personnel on the primary laws and regulations governing patient referrals and other legal restrictions on the manner in which HHSC transacts business, including the penalties that may result of violations of such laws.

F. Work Environment: We recognize that a diverse workforce and safe work environment enriches the life experience of all employees and our community, and HHSC will continue to maintain this culture.

- We will provide a work environment free from disruptive behavior. Disruptive behavior is defined as anything a person (physician, employee, volunteer, patient, etc.) does that interferes with the orderly conduct of hospital business, including safety, patient care and every aspect of hospital operations.
- Retaliation or retribution against any employee or person who reports, or was subjected to or participated in any investigations alleging violations under the Code of Conduct will not be tolerated. However, we also will not tolerate any employee or other person

deliberately making a false report of a compliance violation or deliberately falsifying documents or information in response to a compliance investigation.

- We will provide equal employment opportunities to employees and applicants for employment without regard to race, color, age, religion, national origin, gender, sexual orientation, veteran status or disability, in accordance with applicable law.
- We have developed and implemented policies and procedures that promote compliance with laws governing nondiscrimination in personnel actions, including recruiting, hiring, evaluation, transfer, workforce reduction, termination, compensation, counseling, discipline and promotions.
- We have developed and implemented “non-harassment” and “no tolerance” policies addressing workplace violence and negotiated provisions on workplace violence in applicable collective bargaining agreements.
- We will perform thorough background checks of potential employees to verify credentials.
- We have developed policies promoting a drug free workplace and negotiated provisions on substance abuse testing in applicable collective bargaining agreements.
- We have developed policies and procedures to effectively monitor the dispensing of and to promote the appropriate storage of controlled substances.
- We have implemented policies, procedures, and monitors to protect employees from potential workplace hazards.

G. Information and Information Systems. We recognize that the provision of healthcare services generates business, financial, and patient-related information that requires special protection. We will establish systems that ensure such information is used appropriately and properly safeguarded.

- We are committed to safeguarding the integrity and accuracy of the documents and records in our possession, and will develop systems and policies and procedures sufficient to:
 - Establish retention periods and protocols for business, financial and patient records.
 - Prevent the alteration, removal or destruction of records or documents except according to our retention policy and applicable ethical and legal standards.
 - Promote the accurate and detailed documentation of all business, financial and patient transactions.
 - Control and monitor access to HHSC communications systems, electronic mail, Internet access and voicemail to ensure that such systems are accessed appropriately and used in accordance with HHSC's policies and procedures.
 - Protect the privacy and security of patient medical, billing, and claims information by implementing sufficient physical, systemic and administrative measures to prevent unauthorized access to or use of patient information, and to track disclosers of such information as required by law.
- Provide access for our patients and their legal representatives to patients' medical, billing and claims information, as required by law.
- Safeguard the personal and human resources information of our employees including, salary, benefits, medical and other information retained within the human resources system.

VI. VIOLATIONS OF THE CODE OF CONDUCT

HHSC is committed to promoting compliance with the Code of Conduct, and violations of the Code of Conduct may lead to discipline (up to and including termination of employment), termination of Medical Staff privileges, or termination of contract as appropriate. Disciplinary actions will be in accordance with the respective collective bargaining agreements, the HHSC Human Resources and Civil Service System Rules and the HHSC/Medical Staff policies and procedures, as applicable.

To assist in ensuring compliance with the Code of Conduct, HHSC has provided all employees, management, Board members, Medical Staff and agents with a means of raising questions and concerns, and reporting any conduct that the employee, manager, director, member of the Medical Staff or agent suspects is in violation of this Code of Conduct, HHSC policies and procedures, and applicable laws and regulations. Employees, management, the Board, Medical Staff and agents are expected and required to communicate any suspected violations of the Code of Conduct, HHSC policies and procedures, and applicable laws and regulations to, as applicable, an immediate supervisor, a RCO or the CCPO.

For anonymous reporting, HHSC has established a telephone hotline, which is available 24 hours a day, 7 days a week: **1-877-733-4189**. The RCOs and the CCPO shall be responsible for investigating reports received on this hotline, with assistance from the Legal Department as warranted.

The following list, while not exhaustive, describes the type of concerns and questions that employees, management, Board members, Medical Staff and agents should raise with, as applicable, an immediate supervisor, a RCO, the CCPO or through HHSC's telephone hotline:

- the possible submission of false, inaccurate or questionable claims to Medicare, Medicaid or any other payor;
- the provision or acceptance of payments, discounts or gifts in exchange for referrals of patients;
- the utilization of improper physician recruitment techniques under applicable law;
- allegations of discrimination;
- potential breaches of confidentiality or privacy; and
- situations that could raise conflicts of interest concerns.

VII. REVISIONS OF THE CODE OF CONDUCT

This Code of Conduct will be reviewed annually by the Compliance Committee to foster its effectiveness. Suggested changes to the Code of Conduct will be presented to the President and CEO. The Code of Conduct may be amended, modified or waived only with the approval of the President and CEO.

EMPLOYEE ACKNOWLEDGEMENT AND CERTIFICATION

I hereby certify that I have received and read **Hawaii Health Systems Corporation's Code of Conduct** and I understand that compliance with the requirements set forth in the Code of Conduct is a condition of my continued employment. I understand that it is my responsibility to read, understand and seek guidance, should I require clarification, with regard to the standards set forth in the Code. I also understand that I may be subject to disciplinary action, up to and including termination, for violating these standards or failing to report violations of these standards. The disciplinary actions will be in accordance with the respective collective bargaining agreements and the HHSC Human Resources and Civil Service System Rules, as applicable.

Print Name: _____

Signed: _____

Department: _____

Date: _____

BOARD MEMBER ACKNOWLEDGEMENT AND CERTIFICATION

I hereby certify that I have received and read **Hawaii Health Systems Corporation's Code of Conduct**. I understand that it is my responsibility to read, understand and seek guidance, should I require clarification, with regard to the standards set forth in the Code, and to act in accordance with these standards at all times in my service as a member of Hawaii Health Systems Corporation's Board of Directors.

Print Name: _____

Signed: _____

Region: _____

Date: _____

Please retain a copy for your records and return your original signed acknowledgement form to:

**Chief Compliance & Privacy Officer
Hawaii Health Systems Corporation
3675 Kilauea Avenue
Honolulu, HI 96816**

MEDICAL STAFF ACKNOWLEDGEMENT AND CERTIFICATION

I hereby certify that I have received and read **Hawaii Health Systems Corporation's Code of Conduct**. I understand that it is my responsibility to read, understand and seek guidance, should I require clarification, with regard to the standards set forth in the Code, and to act in accordance with these standards at all times.

Print Name: _____

Signed: _____

Region: _____

Date: _____

AGENT ACKNOWLEDGEMENT AND CERTIFICATION

I hereby certify that I am the independent contractor referenced below (the Contractor), or am a duly authorized officer of the Contractor. On behalf of the Contractor and its employees, officers, Board members, and agents, I certify that I have received and read **Hawaii Health Systems Corporation's Code of Conduct**, and that the employees and agents of the Contractor providing services to or for the Hawaii Health Systems Corporation will receive and read the Code of Conduct. I understand that it is our responsibility to read, understand and seek guidance, should we require clarification, with regard to the standards set forth in the Code, and to act in accordance with these standards at all times in performing services for HHSC.

Print Name of Contractor: _____

Signature of Contractor: _____

By: _____

Title: _____

Date: _____