



**ANNUAL COMPLIANCE STATEMENT  
AND  
INFORMATION ACKNOWLEDGEMENT FORM**

I am not aware of any compliance issues and if I am aware of any issue or concern, I have reported the issue to one of the following individuals or called the anonymous compliance hotline:

Chad Dobson, Volunteer Coordinator (608) 374-0250  
Siera Williams, Hospice Director (608) 374-0250  
Shelly Egstad, Tomah Health Compliance Officer (608) 377-8689  
Anonymous Compliance Hotline (608) 377-8689

I further acknowledge that I have received and reviewed **Tomah Health's Emergency Operations Plan.**

Print Name: \_\_\_\_\_

Signed Name: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Volunteer Coordinator Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_