525 WEST JEFFERSON ST. ● SPRINGFIELD, ILLINOIS 62761 ● (217) 782-3516 FAX: (217) 785-4111

MEMORANDUM

Review Board

TO:	Mike Constantino, Chief – Program Review Section Division of Health Systems Development
FROM:	Kathy Olson, Chairman Illinois Health Facilities and Services Review Board
RE:	Approval of Permit # 15-012
Facility:	Fresenius Medical Care Round Lake, Round Lake
This is to advise you that I have reviewed the above-captioned certificate of need for the change of ownership of Fresenius Medical Care Round Lake.	
X	The request is in compliance with the requirements of Part 1110.
	This request is to be reviewed by the Health Facilities Planning Board.
	Other actions as follows:
4	athy Ole 6.2.2015
•	Olson, Chairman Date s Health Facilities and Services