



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

MEMORANDUM

TO: Mike Constantino, Chief – Program Review Section
Division of Health Systems Development

FROM: Debra Savage, Chairman
Illinois Health Facilities and Services Review Board

RE: Relinquishment of Permit #17-072

Facility: Illinois Vascular Care

This is to advise you that I have reviewed the above-captioned relinquishment of permit with the requirements in 77 IAC 1130.580 and have determined the following:

 X This request for relinquishment is in compliance with the requirements in 77 IAC 1130.580.

 This application is to be reviewed by the Health Facilities Planning Board.

 Other actions as follows:

A handwritten signature in cursive script, reading "Debra Savage", written over a horizontal line.

Debra Savage, Chairman
Illinois Health Facilities
and Services Review Board

02/03/2020

Date