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September 6, 2018

RECEIVED

Via Federal Express

SEP 07 2018

Mike Constantino
Illinois Health Facilities and Services Review Board
525 West Jefferson Street, 2nd floor
Springfield, IL 62761

**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

**Re: Authorization to Access Information (VHS West Suburban Medical
Center Certificate of Exemption)**

Dear Mike:

Enclosed you will find the original signature for the Authorization to Access Information (VHS West Suburban Medical Center of Exemption) to be included with the Certificate of Exemption Application for VHS West Suburban Medical Center.

Please give me at (617) 378-4442 if you have any questions.

Very truly yours,

Jared L. Schwartz

Enclosure

JLS/pas

Enclosure

cc: Anne M. Murphy, Esq. (w/o enl.)

► ALBANY ► BOSTON ► HARTFORD ► MANCHESTER ► NEW YORK ► PROVIDENCE

September 5, 2018

Ms. Courtney R. Avery
Administrator
Illinois Health Facilities & Services Review Board
525 West Jefferson Street, Second Floor
Springfield, Illinois 62761-0001

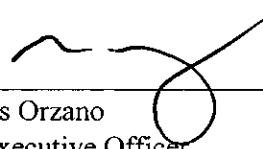
Mr. Michael Constantino
Supervisor, Project Review Section
525 West Jefferson Street, Second Floor
Springfield, Illinois 62761-0001

Re: Authorization to Access Information (VHS West Suburban Medical Center Certificate of Exemption).

Dear Ms. Avery and Mr. Constantino:

Pursuant to 77 Ill. Admin. Code §1110.230, I hereby authorize the Illinois Health Facilities & Services Review Board (the "Board") and the Illinois Department of Public Health ("IDPH") to access all information necessary to verify any documentation or information submitted by Pipeline – West Suburban Medical Center, LLC with this application. I further authorize the Board and IDPH to obtain any additional documentation or information which the Board or IDPH finds pertinent and necessary to process this application.

Sincerely,



Nicholas Orzano
Chief Executive Officer

SUBSCRIBED AND SWORN
to before me this 5th day
of September, 2018.

Please see attached

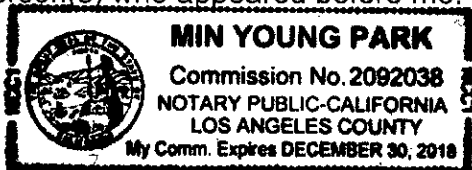
Notary Public

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Los Angeles

Subscribed and sworn to (or affirmed) before me on this 5th
day of September, 2018, by Nicholas Orzano

proved to me on the basis of satisfactory evidence to be the
person(s) who appeared before me.



(Seal)

Signature

A handwritten signature in cursive script, appearing to read "Nicholas Orzano", written over a horizontal line.