



CORPORATE COMPLIANCE ATTESTATION

I, _____ (print name) have received a copy of the Three Pillars Code of Conduct.

I understand it is my responsibility to review and understand the Three Pillars Code of Conduct, and agree to comply with the obligations described therein, including, but not limited to, the requirement to report any suspected noncompliance.

If signing on behalf of an organization, I agree to review the Three Pillars Code of Conduct with our employees who will provide services to Three Pillars. I agree our employees will comply with the Three Pillars Code of Conduct when providing services to Three Pillars.

I acknowledge and agree that if I (or our employees) have further questions or concerns, I (they) will immediately contact the Corporate Compliance Officer or Three Pillars President/CEO.

I hereby certify that I am not aware of any compliance violations, or any other issues or concerns related to compliance.

Name (print): _____

Signature: _____

Date: ____/____/____

Three Pillars Relationship: (check one)

- Volunteer
- Direct Patient Care Contact (DPCC)
Organization Name: _____
- Board of Director/Board Committee Member
- Employee

Upon completion, please send or email to:

Kathy Bernaden VP of People & Corporate Compliance Officer
410 N Main Street
Dousman, WI 53118

Email:
corporatecomplianceofficer@threepillars.org

For questions regarding this form, contact Kathy Bernaden at: 262.965.7345.

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