

Algoma
Nurse Practitioner-Led Clinic

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Board Member and Committee Member Annual Agreement

This is to certify that as a board member of the Algoma Nurse Practitioner-Led Clinic for the year(s) 2018-2019. I have read, understand, and agree to comply with the ANPLC Board Code of Conduct, Conflict of Interest, Confidentiality, and Duties Obligations and Expectations policies.

Name	Signature	Date
1. Giulian Diluzio	<i>[Signature]</i>	Sept 10/18
2. STEPHEN HUSSEY	<i>[Signature]</i>	SEPT. 10/2018
3. Brenda Warnock	<i>[Signature]</i>	Sept 10/2018
4. Christene Haitinen	<i>[Signature]</i>	Sept 10/2018
5. Wendy Payne	<i>[Signature]</i>	Sept 10/2018
6. CATHY NICHOLS	<i>[Signature]</i>	Oct. 15 2018
7. DOUG ABBOTT	<i>[Signature]</i>	Oct 15, 2018
8. Lyndsay Suurna	<i>[Signature]</i>	Oct 15, 2018
9.		
10.		