

10/29/2022

Determination of Need Program  
Massachusetts Department of Public Health  
250 Washington Street, Boston, MA 02108

Via email to: [DPH.DON@massmail.state.ma.us](mailto:DPH.DON@massmail.state.ma.us)

**RE: Determination of Need project BMCHS-22080908-HE**

Dear Determination of Need Program Representative:

We are writing pursuant to the provisions of 105 CMR § 100.600 - § 100.603 relative to the above-mentioned Determination of Need (DoN) project at Boston Medical Center.

We are all residents of the Commonwealth of Massachusetts and pay taxes within the Commonwealth. We hereby request recognition as an "Interested Party" and the rights associated with such a designation, including notice concerning, and participation in the review of the above-referenced DoN application. We are all members or allies of and are representing the interests of 1199 SEIU United Health Care Workers East; none of us is acting as an agent for any other party.

(over)

The taxpayer designated to receive all correspondence relative to this request is:

Allen Jackson  
108 Myrtle Street, 4th Floor  
Quincy, MA 02171  
Phone: 617-284-1123  
Fax: 617-474-7150  
Email: [allen.jackson@1199.org](mailto:allen.jackson@1199.org)

Please find the signature pages following.

Sincerely,

Allen Jackson  
Researcher



Signature Page for 1199 SEIU Ten Taxpayer Group re: Project BMCHS-22080908-HE

Name (signature and printed)

Home Address

1.

KC  
Kristina Coppers

[REDACTED]

2.

Carla White  
Carrie-Ann White

[REDACTED]

3.

Julia Russo  
JULIA RUSSO

[REDACTED]

4.

Bridget Cleary  
Bridget Cleary

[REDACTED]

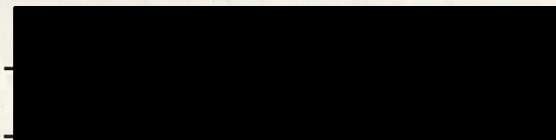
5.

CHRISTINA LaCasca  
[Signature]

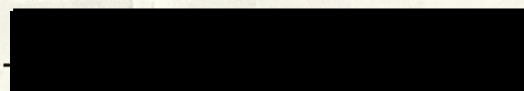
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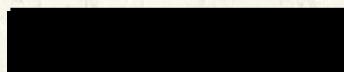
6. Gifty Adese Anwaitey  
Gifty Adese



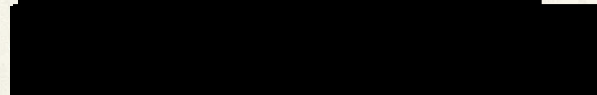
7. Amanda Barrett  
Amanda Barrett

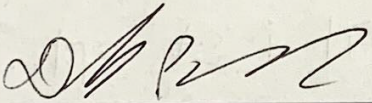


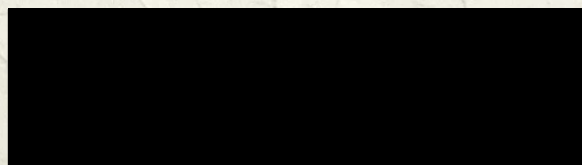
8. Joy Crowley RN  
Joy Crowley RN



9. Keri Turner  
Keri Turner



10.   
Debbie Pachon



11. Lisa Satkevich  
Lisa Satkevich

