



Massachusetts Department of Public Health

Determination of Need

Affiliated Parties

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DRAFT

Application Date: November 12, 2021 Application Number: PAM-21111018-TO

Applicant Information

Applicant Name: PAM Cubed, LLC

Contact Person: Emily Kretchmer Title: Attorney

Phone: 617-482-7211 Ext: E-mail: ekretchmer@kb-law.com

Affiliated Parties

1.9 Affiliated Parties:

List all officers, members of the board of directors, trustees, stockholders, partners, and other Persons who have an equity or otherwise controlling interest in the application.

Add/ Del Rows	Name (Last)	Name (First)	Mailing Address	City	State	Affiliation	Position with affiliated entity (or with Applicant)	Stock, shares, or partnership	Percent Equity (numbers only)	Convictions or violations	List other health care facilities affiliated with	Business relationship with Applicant
<input type="checkbox"/> <input type="checkbox"/>	Misitano	Anthony	1828 Good Hope Road, Suite 102	Enola	PA		President & CEO			No		Yes
<input type="checkbox"/> <input type="checkbox"/>	Misitano	Britany	1828 Good Hope Road, Suite 102	Enola	PA		Vice President, Secretary, Shareholder	Partnership	68%	No		Yes
<input type="checkbox"/> <input type="checkbox"/>	Stober	Karick	1828 Good Hope Road, Suite 102	Enola PA	PA		Vice President and CFO			No		Yes

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