April 24, 2025

Dennis Renaud, Director, Determination of Need Program Massachusetts Department of Public Health

67 Forest St., Marlborough, MA 01752 DPH.DON@massmail.state.ma.us

**Re: Determination of Need Application UMMH-25021208-HE Registration of Ten Taxpayer Group (TTG)**

Dear Mr. Renaud,

Pursuant to the provisions of 105 CMR. §§ 100.100 and 100.435, please accept the following request for the registration of a TTG relative to Determination of Need (DoN) Application UMMH-25021208-HE for a substantial change in service and substantial capital expenditure to develop a Proton Therapy Service at the UMass Memorial Medical Center Cancer Center at Marlborough. Please note the following:

1. The name and resident address of each TTG member is attached.
2. Each TTG member is a resident of the Commonwealth of Massachusetts and is subject to any Massachusetts state income, excise or property tax during 2025, the year in which the Application was filed.
3. The representative of the Community Supporters TTG designated to be the recipient of all written communications concerning the Application relative to this request is from William Fischer, Marlborough, Massachusetts. All materials can be sent to William Fischer, 540 Bigelow Street, Marlborough, MA 01752 or billandsuefischer@verizon.net

We have discussed the DoN Application with the Applicant and are in support of UMass Memorial Health's plans to develop a Proton Therapy Service at the UMass Memorial Medical Center Cancer Center at Marlborough. We believe bringing this service to Marlborough will improve access to life-saving cancer care in our region, boost innovation and job creation, and enhance health equity and patient outcomes.

We are not acting as an agent for the Applicant or another party. We are community members including trustees, Patient and Family Advisory Council members, patients, patient' family members and residents of the community.

Thank you for your attention to this matter.

[signature on file]

William Fischer

 April 18,2025

To Whom It May Concern:

I am signing below as a member of the Community Supporters Ten Taxpayer Group regarding Determination of Need Application UMMH-25021208-HE for a substantial change in service and substantial capital expenditure to develop a Proton Therapy Service at the Cancer Center in Marlborough.

|  |  |
| --- | --- |
| Printed Name | Brian Bouvier |
| Signature | [signature on file] |
| Home Address | [redacted] |

April 18, 2025

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|  |  |
| --- | --- |
| Printed Name | Kellie Malo |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Elbin Hernandez |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Cristhian Camilo Rincon Gonzalez |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Awilda Alago |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Timothy Perry, Jr. |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Timothy Perry, Sr. |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Susan Maluszewski |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Edna Karina Sopaz |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Shannon Wells |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Rebecca Grew |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Erin Janda |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Douglas J. Burelick |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Peter Pender |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Peter Quinn |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Donald Lowe |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Steven Donnini |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Gary L. Brown |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Craig Sullivan |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Thomas Wollerman |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | John McGown |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Michael Grady |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | John J. Joyce |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Cherie Semenchuk |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Adrian Nieves |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Malak Alkrushtarie |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Lauren Goodale |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Margarita Molina |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Alla Dorogopulko |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Ellen W. Dorian |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | William S. Fischer |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Susan M. Fischer |
| Signature | [signature on file] |
| Home Address | [redacted] |

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| Printed Name | William J. Fischer |
| Signature | [signature on file] |
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|  |  |
| --- | --- |
| Printed Name | Jeffrey R. Sternick |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Cheryl Pisan |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Georgina Chamberlain, DMD |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Lauren Chamberlain |
| Signature | [signature on file] |
| Home Address | [redacted] |

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|  |  |
| --- | --- |
| Printed Name | Paul Chamberlain |
| Signature | [signature on file] |
| Home Address | [redacted] |