January 11th 2023

Determination of Need Program

Massachusetts Department of Public Health 67 Forest Street, Marlborough, MA 01752 [DPH.DON@massmail.state.ma.us](mailto:DPH.DON@massmail.state.ma.us)

Re: Determination of Need Application DFCI-23040915-HE Registration of Ten Taxpayer Group (TTG)

Dear Commissioner Goldstein and DoN Program:

We, the undersigned, write pursuant to the provisions of 105 CMR 100.100 to formally register as a Ten Taxpayer Group for the Dana-Farber Cancer Institute Determination of Need (DoN) Application filed with the Department of Public Health on January 8, 2024.

Our group (*formally named the “Patients and Family Advocates of Dana-Farber Cancer Institute”*) are all residents of the Commonwealth of Massachusetts and pay taxes within the Commonwealth. We hereby request recognition as a Ten Taxpayer Group and the rights

associated with such a designation including notice concerning, and participation in, the review of the above captioned DoN Application.

We have discussed the DoN Application with the Applicant. We are not acting as an agent for the Applicant or another party.

The taxpayer designated to receive all written correspondence relative to the above-captioned DoN Application on behalf of the Ten Taxpayer Group is Shelly Plumb (contact information

included below).

Thank you in advance for your attention to this matter. Respectfully submitted by:

1. Shelly Plumb Address: [redacted]

Email: [redacted]

Signature: [signature on file]

1. Susan E. Seibert Address: [redacted]

Signature: [signature on file]

1. Anita M. Rodriguez [address redacted]

[Insert Name] Address: [Insert Address]

[signature on file]

Signature: [Insert Signature]

Tim Stancell-Condron [address redacted]

[signature on file]

[Insert Name] Address: [Insert Address]

Susan Herlihy [address redacted]

Signature: [Insert Signature][signature on file]

Judy Fine-Edelstein

[address redacted]

[email redacted]

[signature on file]

Steven Eichberg Address: [address redacted]

Signature: [signature on file]

Charles J. Roussel

[address redacted]

[signature on file]

Jenny Dahlstein Address: [address redacted]

Signature: [signature on file]

[Insert Name] Address: [Insert Address]

Austin Spent [address redacted]

Signature: [Insert Signature][signature on file]