## PLAN SPONSOR'S CERTIFICATION TO RECEIVE PROTECTED HEALTH INFORMATION (PHI)

Plan Sponsor hereby certifies that the Group Health Plan Document has been amended to incorporate the terms required by the federal Privacy Rule, and that the Plan Sponsor agrees to comply with those provisions. Specifically, the Plan Sponsor certifies that it will:

1) Not use or further disclose protected health information ("PHI") other than as permitted or required by the plan documents, or as required by law, 2) ensure that any subcontractors or agents to whom the Plan Sponsor provides PHI agree to the same restrictions, 3) not use or disclose PHI for employment related actions, 4) report to the health plan any use or disclosure that is inconsistent with the plan document or the federal Privacy Rule, 5) make the PHI information accessible to the Participants, 6) allow Participants to amend their PHI, 7) provide an accounting of its disclosures of PHI as required by the Privacy Rule, 8) make its practices available to the Secretary for determining compliance, 9) return and destroy all PHI when no longer needed, if feasible, and 10) adequate firewalls have been established

Plan Sponsor: Erdman Automation Corporation
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Signature: A Produce of the Signature of
Printed Name: Printed Name:
Title: Financial Manager + Human Beyources Director
Date: