

**Compliance Report****Compensation Arrangements**

Pursuant to Section 7.18 of the *Broader Public Sector Accountability Act, 2010*, S.O. 2010, Chapter 25

**Name of Employer**

The West Nipissing General Hospital

With regard to the *Broader Public Sector Accountability Act, 2010*, Part II.1, Compensation Arrangements, and the compensation plans of designated executives and designated office holders of the employer as well as with respect to the employer's performance pay envelopes, I certify that to the best of my knowledge and belief, the employer has complied with the restraint measures throughout the reporting period in accordance with the *Broader Public Sector Accountability Act, 2010*, Part II.1, Compensation Arrangements.

**Highest Ranking Officer**

Last Name

Désormiers

First Name

Cynthia

Middle Initial

AM

Position Title

President - Chief Executive Officer

**Reporting Period**

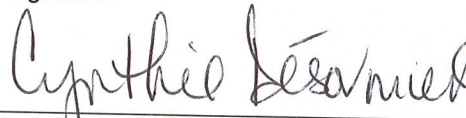
Start Date (yyyy/mm/dd)

2014/04/01

End Date (yyyy/mm/dd)

2015/03/31

Signature

  
Date (yyyy/mm/dd)

2015/04/01