

### **Part C – Decision Under Appeal**

The decision under appeal is the Ministry of Social Development and Poverty Reduction's (the "Ministry") Reconsideration Decision of April 29, 2024. In the Reconsideration Decision the Ministry determined that the Appellant was not eligible for disability assistance for the months of December 2023 and January 2024.

The Appellant has Persons with Disabilities status but was ineligible for assistance because they were absent from British Columbia for more than 30 days without prior authorization from the ministry to continue receiving disability assistance during this period.

The Ministry determined that the Appellant had not provided documentation showing that a medical practitioner had prescribed the medical therapy necessitating the absence.

### **Part D – Relevant Legislation**

Employment And Assistance for Persons with Disabilities Regulation (the "Regulation"), section 15.

Relevant sections of the Regulation can be found in the Schedule of Legislation at the end of this document.

**Part E – Summary of Facts**

A hearing was held via teleconference on June 11, 2024.

*Background*

- The Appellant is a sole recipient of disability assistance.

*Information before the Ministry at the time of reconsideration*

- A collection of documents dated August 21, 2023 to March 7, 2024 from a primary care center.
  - August 21, 2023 – appears to be information from an intake appointment:
    - A (family member) had similar Parkinson-like condition.
    - Was in hospital for 4 months. Doctors state her condition is not Parkinson.
    - Main concern now is shaking, stiffness and sore muscles.
    - Plans to have surgery for deep brain stimulation (“DBS”).
    - Observations include slow and slightly slurred speech and visible leg tremors.
  - August 22, 2023 – a “Tel - Progress Note” documenting a conversation between the Appellant’s Social Worker (“SW”) and a Senior Policy Analyst (“SPA”) in the Ministry of Health.
    - Inquired about Out of Country funding for the Appellant to access DBS in (another country). SPA states that unless a specialist recommends the treatment, an Out of Country treatment application will not be approved.
    - SPA recommends that Appellant ask her (family member) for any medical documents that indicate her diagnosis given in (another country) and the medical justification for DBS treatment.
  - August 22, 2023 – a “Tel – Progress Note” documenting a conversation between SW and the Appellant.
    - SW provided Appellant with the information from SPA.
    - Appellant is aware that at this time, an Out of Country funding request would be denied without signoff from a specialist with diagnosis and subsequent treatment justification.
    - Appellant states that she has a discharge report of her (family member’s) that includes a diagnosis which she has translated. Appellant can provide.
    - 2021 JUN 23 Molecular Genetics Laboratory - interpretation indicates that genetic counselling is recommended for Appellant. Genetics clinic to inquire whether a referral was ever received. The report was sent to a retired GP, so it is highly likely that a referral was never submitted. SW confirm

- whether a genetic counselling referral was made and submit one with recommendation from Molecular Genetics Laboratory.
- August 23, 2023 – a “Tel – Progress Note” documenting a conversation between SW and Genetics Counseling Lab.
    - Confirmed a referral has not been received for Appellant. There is a waitlist of possibly 3 years if the referral is accepted. SW to update Appellant and Dr.
  - September 14, 2023 – Dr. B notes from a medical and psychological review.
    - The discharge summary from hospital strongly suggests that her tremors are psychogenic in origin and there is only a very minor element of Parkinsonism. They felt she had developed a dependence on levodopa, and it had a highly variable effect.
    - Her (family member) in (another country) had DBS 12 years ago with significant relief of identical symptoms.
    - She is tentatively planning to return to (another country) next month and have the DBS there. Her family are making the arrangements.
    - Dr. B suggested doing comprehensive tests. He also suggested she try low dose propranolol 10 mg every 8 hours as an empiric trial to see if it had any benefit to the tremors.
  - September 19, 2023 - “Tel – Progress Note” documenting conversation between SW and Appellant.
    - SW updated Appellant that a referral for genetic counselling was not made, referrals from physicians are screened and, if accepted, ETA is 3 years. SW explained that, with Appellant’s consent, SW may advocate for Appellant’s referral to be accepted and prioritized because the recommendation from hospital for genetics counselling was made in 2019 and a referral was not made at that time. The efficacy of advocacy with this program is unknown but worthwhile in writer's opinion. Appellant would like to speak to Dr. B on making the genetic counselling referral.
    - The current plan is that the Appellant will be traveling to (another country) mid October for the DBS. The Appellant will not be able to work for at least 4 months. She currently has an active Income Assistance service request: however, her earnings are higher than IA, so she is not receiving any benefits.
    - Appellant signed a 12-month consent and authorization form for SW to receive information from the Ministry of Housing and Social Development (MSD) and to make applications on her behalf.
    - SW will contact MSD to inquire whether Appellant may receive full IA benefits monthly while she is away to assist in paying her rent which is \$1200 per month and inquire into any other financial benefits for which she

- may be eligible. SW will submit a Persons with Multiple Persistent Barriers application to MSD at next appointment, which will enable Appellant to make \$15,000 per year without losing her IA benefits post-surgery and will provide some health benefits if the application is approved.
- September 25, 2023 - "Tel – Progress Note" documenting voice mail left with MSD by SW.
    - Requested consult regarding financial resources for Appellant who will not be able to work when she travels to (another country) for the DBS.
  - September 27, 2023 - "Tel – Progress Note" documenting conversation between SW and Appellant, updating her on the conversation with MSD.
    - Recommendation that Appellant apply for PWD. There was an incomplete application that had been submitted in 2016. With PWD she will have additional monthly funding and be able to have a gradual return to work when she returns home (earning exemption of \$15,000 per year). Appellant will need to notify MSD when she will be out of the country for 30 days.
    - PWD assessor section started with Appellant today. She has brought the self report section home to work on.
  - October 12, 2023 – Notes to file by Dr. B
    - Has completed and signed PWD forms.
    - Appellant leaves for (another country) in 3 weeks and will be gone 4 months.
    - Dr. B has refilled meds and Appellant requests small amount of levodopa for the trip as she is adamant that it helps. I look forward to seeing her upon her return.
  - October 18, 2023 – Notes to file by SW
    - SW called Health Assistance Branch of MSD to inquire on PWD ap. Confirmed PWD ap has been received. Request for urgent review has been accepted.
    - Provided Appellant with above update, arranged to contact MSD on Monday Oct 23rd and then call her on Tuesday Oct 24th with an update.
    - Appellant leaves for (another country) on Oct 30th so the hope is that there will be a determination made on the PWD before then.
  - October 25, 2023 - "Tel – Progress Note"
    - SW learned from Appellant via email that she had PWD designation, SW called MSD to confirm that was the case and he agreed it was.
    - MSD worker who SW spoke to yesterday left a V/M stating that she has made a request for Appellant to receive PWD funding when she is out of country, and it needs to be approved by a team leader.

- SW called Appellant and discussed the PWD situation. SW arranged to email her an update after speaking to the ministry on return from vacation in 2 weeks.
  - November 27, 2023 - "Tel – Progress Note"
    - SW called MSD and confirmed that Appellant received PWD payment for December 2023. SW emailed Appellant to update on same.
  - March 7, 2024 – Follow-up notes by Dr. B
    - Appellant did have stereotactic brain surgery in (another country) in November. No complications. She feels it was quite successful and has diminished tremors.
    - Dr. B has refilled meds and she has follow-up appointments with specialists.
- A Neurological Consult report dated May 15, 2023 in which Dr. T summarizes with the following Impression.
  - "I still think (the Appellant) has a functional neurological disorder as her primary condition...she looks essentially unchanged from when I last saw her a year and a half ago, at which time she was on large doses of levodopa. Therefore, I do not think it is reasonable to restart her on levodopa. I think the mainstay of therapy for her at this point is mental-health related. I did encourage her to exercise and to try to strengthen her legs; however, I am not sure she will follow through with that."
  - Dr. T notes that the Appellant "again asked today whether DBS would be appropriate for her." There is no indication that Dr. T responded to the question.
- A Health Care Professional referral form dated August 22, 2023, completed by SW on behalf of Appellant. Reason for referral is:
  - "Home Safety Assessment – extreme tremors in lower extremities, shortness of breath, lower back risk. Fall risk...."
- Letter from SW to MSD dated March 20, 2024
  - The Appellant was attached in August 2023 so for primary care so there are not a ton of notes from her primary care provider Dr. B.
  - The Appellant was referred to a neuropsychiatrist (Dr. G) upon release from hospital in February 2023, but Dr. G closed his practice, so we do not have an updated neurology report.
  - The Appellant will be providing the clinic with her records from (another country) and SW will send those along when they are received.

- Monthly Report dated December 27, 2023, indicating no income.
- PWD Application Medical Report dated October 12, 2023 and completed by Dr. B.
  - Under Health History says, "She is desperate for help and may travel to (another country) for further therapies."
- Genetic Testing Report dated January 30, 2023. Clinical Summary states:
  - A pathogenic variant, Deletion (Exon 2) was identified in PRKN.
    - The PRKN gene (formerly known as PARK2) is associated with autosomal recessive early-onset Parkinson disease 2 (PARK2)
    - This individual is a carrier for autosomal recessive PRKN-related conditions. This result is insufficient to cause autosomal recessive PRKN-related conditions; however, carrier status does impact reproductive risk.
- Hospital Discharge Summary dated February 8, 2023, prepared by Dr M. Mostly discusses Appellant's medical condition.
  - Discharge Diagnoses:
    - Functional neurological disorder
    - Heterozygous PRKN Exon 2 deletion, with possible underlying genetic parkinsonism in the very early stages of development.
  - Post Discharge Follow-up
    - Psychiatrically, follow-up with Dr. G
    - Neurologically, follow-up with Dr. T
    - Neuropsychiatrically, follow-up with Dr. M
- PWD Application Applicant Information dated October 2, 2023, prepared by Appellant.
  - Under Disabling Condition, the Appellant states, "Early Parking (sic) Disease. The limbs have been trembling with trunk stiffness for more than 16 years and getting worse over the time.
- PWD Application Assessor Report dated October 9, 2023, prepared by SW. The content primarily addresses the requirements for PWD but contains the following statements relevant to this appeal.
  - Appellant's mental or physical impairment
    - Functional Neurological Disorder
    - Underlying genetic Parkinsonism (genetic testing confirmed)
    - Dystonia/depression and anxiety disorder
  - Additional information

- (Appellant) will be travelling to (another country) to receive DBS surgery to treat the genetic parkinsonism tremors. She will then need rehabilitation for 3 – 4 months before being able to travel back to Canada.
- Discharge records from hospital in (another country) dated November 29, 2023, prepared by Dr. Y.
  - Appellant was in the hospital in (another country) for 20 days.
  - Diagnosis was Parkinson’s disease, pulmonary nodules, leukopenia, anemia, tinea corporis, and a history of otitis media.
  - A bilateral subthalamic nucleus deep brain electrode placement surgery was carried out.
  - The patient’s post-operative recovery was satisfactory, and she was discharged without any special discomforts.
- A collection of documents dated August 21, 2023 to March 7, 2024 from a primary care center.
  - March 12, 2024 – a “Tel - Progress Note” documenting a telephone conversation between SW and the Appellant.
    - SW called Appellant. She is aware that she will not receive any reimbursement from MSP for surgical procedure she had in (another country).
    - Appellant states she did not receive the PWD payment for December or any other month while she was away.
    - Appellant returned to Canada on February 20, 2024 and returned to work on February 28.
    - Appellant consented to have SW contact MSD on her behalf to inquire into back pay and escalate this concern. SW to contact Health Assistance Branch regarding PWD not received as indicated by 2 ministry workers.
  - March 19, 2024 – a “Tel - Progress Note” documenting exchange between SW and team lead at Health Assistance Branch.
    - SW left voice mail for team leader at Health Assistance Branch.
    - On call back team leader informed SW that out of country request was not approved by supervisor and no one had let Appellant know. Appellant can request reconsideration once PWD benefits are reinstated. Team Lead is requesting medical information to corroborate need for procedure out of country.
  - March 20, 2024 - “Tel - Progress Note” documenting conversation between SW and Appellant and exchange with team leader
    - Appellant provided consent to send medical records to MSD although she thought they already had them with PWD application.

- SW reiterated to team leader that, since Appellant was recently attached to Dr. B, there were not a lot of records available. The neuropsychiatrist (Dr. G) had retired so there is no update neurology report. Appellant will provide her records from (another country).
- March 21, 2024 - "Tel - Progress Note" documenting exchange with team leader.
  - Supervisor did not approve the reconsideration with the medical information submitted.
- Reconsideration Request dated April 11, 2024
  - Summarizes the previous contacts and adds:
    - "No one called me or notified me through my Self Serve account that I was required to submit a confirmation of the proposed program/therapy and future address. I would have submitted this if I had known it was required.
    - No one notified my SW that I was to submit confirmation of the proposed program/therapy or a future address.
    - Again, there was no communication through my Self Serve account that I needed to submit any documents related to my pending surgery in (another country) to receive PWD in December and for the months that I was away.
    - My social worker was told by (a worker) at Health Assistance Branch on October 25<sup>th</sup> that a team leader needed to approve the PWD benefit for out of country and that (a worker) would explain the situation and it was expected to be approved. At that time (a worker) did not state that I need to confirm proposed program / therapy and future address as stated in this denial of benefit document.
    - My Self Serve account showed that I would receive PWD payment on November 22<sup>nd</sup>, 2024 (sic). I did not receive that payment.
    - My Self Serve account showed that I would receive PWD payment on December 20<sup>th</sup>, 2024 (sic). I did not receive that payment.
    - I submitted a monthly report while I was in hospital in December 2023 for my January report for PWD."

### *Testimony at the hearing*

- The Appellant and Advocate
  - Clarified that the Appellant had been involved in a treatment program at a university and, when discharged, the transition was not smooth.
    - The medical specializations required were not available in the city in which the Appellant lives.



- A referral was made to a specialist in neurology but there was a long wait time.
- A referral was made for genetic testing but not available for approximately three years.
- The Appellant was attached to Dr. B to assist in the meantime.
- Asked Health Assistance Branch for alternatives and was told there were none available outside of mental health support.
- Expressed a high degree of frustration with the lack of guidance, incorrect information, and the amount of wasted time as a result while working against a tight deadline.
  - Initially told Person with Persistent Multiple Barriers (PPMB) designation would be most efficient path; then was told no, application for Person With Disabilities (PWD) designation would be better; then, after spending the time completing the application, told PWD was already in place. The Appellant relied on the SW to assist her and the SW, not being familiar with the process as part of her normal duties, relied on contacts within MSD for their direction.
  - Relied on feedback from MSD worker that it had to be reviewed by supervisor but should be approved, which indicated nothing was missing. When SW followed up with Community Liaison on November 24, 2023, she was told the file was set to pay assistance for December, which indicated it had been approved.
- In response to a question from the Ministry representative, the Appellant said she had to borrow money from a friend to pay her rent, with the promise to pay her back on her return to Canada. Otherwise, she would have been evicted.
- In response to questions from the Panel, the Appellant said:
  - She had seen Dr. B approximately three or four times.
  - She went out of country to get DBS because of the long wait time to see a specialist in neurology, to get genetic testing, and, if indicated, to get DBS.
  - No doctor had told her she could or should have DBS. Their focus was on her mental health, but the trembling in her body was getting worse. Her (family member) had the same symptoms and had gotten great improvement from DBS in the other country.
  - She booked her flights around the beginning of October. The timing of her trip to another country to obtain the DBS surgery was due to a combination of her frustration that there was no treatment plan in place, her tremors were getting worse, and she was afraid that, if they got any worse, it would affect her work and she would lose her job.

- The Ministry

- The Ministry Representative reviewed the main points of the Reconsideration Decision and provided clarification on some points raised during the Appellant's submission.
  - The request would not have been denied because of the lack of a future address. The primary reason was that no evidence had been submitted indicating that a medical practitioner had prescribed the treatment.
  - The impression that the request was approved by November 27, 2023 could be because of the process followed when a PWD client is out of country for more than 30 days. Thirty-two days after the departure, the file is reviewed and, if proper documentation has not been provided, the client is determined to be ineligible. In the Appellant's circumstances, this review would have occurred December 2, 2023. Therefore, when the SW talked to the Community Liaison on November 27, if only the status was checked, it would still indicate that it was set to send the December assistance.
- In response to questions from the Panel, the Ministry representative stated:
  - The term "medical practitioner" applies only to those who practice within BC. It would not include practitioners from other provinces or other countries.
  - There was no record on file that a MSD worker communicated the denial of disability assistance during the Appellant's absence to either the SW or the Appellant prior to the Appellant's return to Canada.

### **Admissibility of New Evidence**

Under section 22(4) of the *Employment and Assistance Act*, the Panel may admit evidence that is reasonably required for a full and fair disclosure of all matters related to the decision under appeal.

No new documents were submitted. Testimony was received, and any that is admitted as relevant evidence and given weight to possibly affect the finding is specifically mentioned in the Panel's reasons.

**Part F – Reasons for Panel Decision**

The issue in this appeal is whether the Ministry's Reconsideration Decision that the Appellant was not eligible for disability assistance because she was out of country for more than 30 days without prior authorization was reasonably supported by the evidence or was a reasonable application of the legislation in the circumstances of the Appellant.

Section 15 of the Regulation says that a recipient of disability assistance will be declared ineligible if they are absent from BC for more than 30 days in a year unless they obtain prior approval for one of three given reasons. The relevant reason in the circumstances of the Appellant is "to obtain medical therapy prescribed by a medical practitioner."

Therefore, the question before the Panel is whether the Applicant obtained prior approval to be absent from the province more than 30 days to obtain medical therapy prescribed by a medical practitioner.

*Ministry Position*

The ministry acknowledges that the Appellant travelled for the purpose of receiving a medical therapy. However, the ministry finds no evidence to indicate that this medical therapy was prescribed by a medical practitioner. On the contrary, the medical practitioners consulted within British Columbia prescribed treatments including exercise, mental health and psychiatric treatments, and psychotropic medication, with further re-evaluations in British Columbia being recommended.

*Appellant's Position*

No one called me or notified me through the Ministry's electronic system, My Self Serve (MySS), that you were required to submit confirmation of the proposed program/therapy. I would have submitted this information if I had known it was required. No one notified my SW of these requirements either. My SW was told by the ministry on October 25, 2023 that a team leader needed to approve my benefits while I was out of the country. The ministry worker that my SW spoke with said they would explain the situation to the team leader, and they expected my request to be approved. The ministry worker did not state that I needed to confirm my proposed program/therapy.

My MySS account showed that I would receive PWD payments on November 22 and December 20, 2023. On November 27, 2023 it was communicated to my SW that it was approved and I would receive my benefits for December 2023. On March 19, 2024 my SW spoke to a ministry team leader who stated that no one from the ministry had let me or my SW know that the request for continued benefits had been denied on November 6, 2023.

I submitted a Discharge Records document from the Neurosurgery Department of the foreign hospital (dated November 29, 2023). This document describes my medical history and treatment and explains that (as of November 29, 2023) I had been in the hospital for 20 days.

### *Panel's Findings*

Section 15 of the Regulation says:

The family unit of a recipient who is outside of British Columbia for more than a total of 30 days in a year ceases to be eligible for disability assistance or hardship assistance unless the minister has given prior authorization for the continuance of disability assistance or hardship assistance for the purpose of

- (a) permitting the recipient to participate in a formal education program,
- (b) permitting the recipient to obtain medical therapy prescribed by a medical practitioner, or
- (c) avoiding undue hardship.

The Appellant was not leaving the country to participate in a formal education program or to avoid undue hardship. She was leaving to obtain medical therapy. However, there is no evidence that the therapy was prescribed by a medical practitioner. On the contrary:

- During the Appellant's hospitalization, the topic of DBS was raised. When her symptom began presenting, she was analyzed alongside her family member, who is also a carrier for the same genetic mutation and who subsequently received DBS treatment. However, it was felt that the Appellant's symptoms were different and were thought to be related to anxiety. On release, no prescription was made for DBS. Instead, the comment was, "We encourage (the Appellant) to continue to work on her anxiety and avoidance behaviors while in the community, and to build tolerance for grief, guilt, and embarrassment through gradual exposure. We believe that psychotropic will play an important part in assisting her through this process, and we will leave further medication adjustments in the capable hands of her outpatient psychiatrist."
- When Dr. T saw the Appellant on May 15, 2023, although she raised the topic of DBS, Dr. T did not support this and, instead, recommended mental health related therapy and exercise.
- In Dr. B's notes of September 14, 2023, he indicates a professional interest in the DBS treatment the Appellant's family member received and her planned trip to another country. However, he never shows this as a prescribed action. For further action, he says, "I have suggested we do comp tests including FSH. I also suggested she try low

dose propranolol 10 mg every 8 hours as an empiric trial to see if it had any benefit to the tremors.”

- During the appeal hearing, the Appellant stated that none of her doctor had supported her desire for DBS and, instead, focused on the mental health aspects.

The Panel finds that, given the consistent lack of support from the Appellant’s doctors for her desire for DBS, the Ministry was reasonable in determining the Appellant was ineligible for disability assistance because she was outside of BC for more than 30 days without prior approval for a prescribed reason.

### **Fairness of the Process**

The Appellant raised the question of whether the procedure was fair because of the lack of direction and the lack, or incorrectness, of communication by the Ministry. The Panel notes:

The expectation of the Appellant and the SW was that they would get direction throughout the process and, that information would be communicated to them clearly and correctly. Instead, they got misdirected and spent a large amount of time preparing an application for PWD when the Ministry personnel they dealt with should have known that a PWD designation was already in place. They felt they were led to believe that the request would be, and was, approved, only to find out months later that it had been rejected and no one had informed them.

The Panel agrees that the communication throughout the process was poor. However, there is no evidence that the treatment abroad was for the Appellant to receive medical therapy prescribed by a medical practitioner as required by the legislation. The Panel notes that, according to the Interpretation Act, section 29, “medical practitioner means a registrant of the College of Physicians and Surgeons of British Columbia entitled under the *Health Professions Act* to practise medicine and to use the title “medical practitioner””. It does not refer to doctors from other jurisdictions.

The Panel notes that an accelerated process was followed. An accelerated process and non-standard lines of communication can often lead to miscommunication. However, this situation was of the Appellant’s own creation. Although her desire to have DBS was long-standing, when she did decide to go, she allowed only two months in which to get the necessary approval.

The Panel also notes that the file was submitted to the Supervisor on October 25, 2023. Therefore, there was no approval less than a week before the Appellant’s departure. The SW was going on vacation for two weeks. The Appellant could have, at that time,

rescheduled her trip until she was sure that the approval was in place. Instead, she chose to travel as planned. The Supervisor denied the request on November 6, 2023. By this time, the Appellant was out of country. There is no indication in the evidence that, had she been informed of the denial, she would have cancelled her medical plans and returned to BC before the 30-day period had expired. When she was informed of the denial in March, 2024 she was provided with the opportunity to have the decision reviewed. Had a prescription from a medical practitioner been available, it could have been submitted at that time.

### Summary

While the expedited process, non-normal lines of communication, and miscommunication by Ministry personnel resulted in confusion, the rushed process was created by the Appellant's arbitrary departure date. The Appellant gambled on going before approval was obtained and there is no indication that she would have returned had she received information that it was denied. The denial was in accordance with the requirements stated in the Regulation, with the Ministry having no choice but to deny due to the lack of a medical practitioner's prescription.

### **Conclusion**

The Ministry does not have the authority to go beyond what is defined in the Regulation. Therefore, the Panel finds that the Ministry decision that the Appellant ceased to be eligible for disability assistance because there was no pre-approval for an out of country trip more than 30 days is a reasonable interpretation of the legislation and is supported by the evidence.

The Panel confirms the Reconsideration Decision and the Appellant's appeal is unsuccessful.

### **SCHEDULE OF LEGISLATION**

#### **Effect of recipient being absent from BC for more than 30 days**

**15** The family unit of a recipient who is outside of British Columbia for more than a total of 30 days in a year ceases to be eligible for disability assistance or hardship assistance unless the minister has given prior authorization for the continuance of disability assistance or hardship assistance for the purpose of

- (a) permitting the recipient to participate in a formal education program,
- (b) permitting the recipient to obtain medical therapy prescribed by a medical practitioner, or
- (c) avoiding undue hardship.

APPEAL NUMBER 2024-0200

**Part G – Order**

The panel decision is: (Check one)       **Unanimous**       **By Majority**

The Panel       **Confirms the Ministry Decision**       **Rescinds the Ministry Decision**

If the ministry decision is rescinded, is the panel decision referred back  
to the Minister for a decision as to amount?      Yes       No

**Legislative Authority for the Decision:**

*Employment and Assistance Act*

Section 24(1)(a)       or Section 24(1)(b)   
Section 24(2)(a)       or Section 24(2)(b)

**Part H – Signatures**

Print Name  
Wes Nelson

Signature of Chair

Date (Year/Month/Day)  
2024/07/02

Print Name  
Margarita Papenbrock

Signature of Member

Date (Year/Month/Day)  
2024/07/02

Print Name  
Joseph Rodgers

Signature of Member

Date (Year/Month/Day)  
2014/07/01