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Michael J. O'Donnell, Executive Director
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FAX TRANSMISSION

DATE: _____

THE FOLLOWING PAGES ARE BEING TRANSMITTED TO:

NAME: Michael Helder

COMPANY: Gov NHSTF

FAX NUMBER: 312-814-1050

FROM: Long Term Care Residents of Illinois

FAX NUMBER: 309-829-6021

There are _____ pages including this sheet.

COMMENTS: _____

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Governor Pat Quinn
Office of the Governor
207 State House
Springfield, IL 62706

Dear Governor Quinn,

On behalf of the residents at this nursing home, I wanted to let you know how excited we were to learn about what you and your Nursing Home Safety Task Force members have pledged to do, to improve the safety and living conditions in Illinois nursing homes.

We are writing today to urge you to keep this same high level of commitment to this cause. Please continue to fully support all of the recommendations that were put forth in the report issued by the Task Force at the end of February 2010.

We all hope that your Task Force's recommendations and new legislation will provide us with good care; educated nursing home staff and family members; and the safety and security that we rightfully deserve in our home.
Thank you.

Sincerely,

Betty Shumate *Loretta Wolfe of. yonger*
Resident Council President *Joanne* *Linda Studnicka*
Asta Care of Ford County *Joanne Rath*

Cc: Michael Gelder, Nursing Home Safety Task Force Chair
Long Term Care Ombudsman Program
Local State Senator
Local State Representative

Asta Care
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