



# Department of Health

## Resident's Rights Advocate Registration

Section 3701.07 (B), Ohio Revised Code

Note: Only governmental entities and private non-profit corporations or non-profit associations may register.

PLEASE TYPE OR PRINT

### 1. Entity type

- ☐ (a) Non-profit corporation ☐ (b) Non-profit association ☐ (c) State government ☐ (d) County government  
☐ (e) City government ☐ (f) Health district ☐ (g) Other \_\_\_\_\_

### 2. Registrant

Name of entity			
Street address		City	
ZIP	County	Telephone	

### 3. List of names of individuals in registrant headquarters for public to contact

Name	Title	Telephone	Email
Name	Title	Telephone	Email
Name	Title	Telephone	Email

### 4. List of counties serving


### 5. Attestation

By affixing my signature immediately below, I acknowledge awareness of the provisions of the Revised Code which provide that knowingly making a false statement when the statement is in writing on or in connection with a report or return which is required or authorized by law is a misdemeanor of the first degree (Section 2.13[A][7] of the Revised Code) and punishable by a fine of not more than \$1,000 and imprisonment of not more than six months or both, Section 2929.21 of the Revised Code.

I swear or affirm that the information provided herein, and any attachments hereto, have been prepared or carefully reviewed by me and constitute a truthful and correct disclosure of all information therein and, if the above named registrant is a non-profit corporation or non-profit association, that the purposes of such corporation or association include educating and counseling residents, assisting residents in resolving problems and complaints concerning their care and treatment, and assisting them in securing adequate services to meet their needs.

Date	Name of Undersigned	Title
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Filewith:

Ohio Department of Health  
BRO Licensure Program  
246 North High Street  
P.O. Box 118  
Columbus, Ohio 43216-0118

Signature