



Fraud, Waste and Abuse training and General Compliance training
ATTESTATION

By signing below, I attest that my organization, and all employees (including temporary workers and volunteers), and first tier, downstream and related entities (FDRs) have completed the following requirements:

- (i) Have taken the course of Fraud, Waste and Abuse prepared by CMS; and
- (ii) Have taken the General Compliance course prepared by CMS

I also attest that my organization has adopted a Code of Conduct, as required by relevant regulatory authorities

I will notify Delta Dental of any changes to this information.

I am authorized to bind the entity and I attest that the above information is true and correct.

Print name of organization

Print name of organization representative

Representative or individual's title

Signature

Date