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MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES DIVISION OF REGULATION AND LICENSURE SECTION FOR LONG-TERM CARE REGULATION

AFFILIATE LIST - LIMITED LIABILITY COMPANY (LLC)

ATTACH ADDITIONAL SHEETS IF NECESSARY

ZIP CODE

STATE

% OF INTEREST IN LLC

ZIP CODE

ZIP CODE

ZIP CODE

STATE

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STATE

All forms may be found on our website at: http://www.dhss.mo.gov/NursingHomes/AppsForms.html

NAME

PART I MANAGERS

NAME

ADDRESS

CITY

STATE

ZIP CODE

NAME

ADDRESS

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STATE

ZIP CODE

CITY

ADDRESS	CITY	STATE	ZIP CODE	
PART II MEMBERS				
NAME			% OF INTEREST IN LLC	
ADDRESS	CITY	STATE	ZIP CODE	
NAME		% OF INTEREST	% OF INTEREST IN LLC	
ADDRESS	CITY	STATE	ZIP CODE	
IAME		% OF INTEREST	% OF INTEREST IN LLC	
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ADDRESS	CITY	STATE	ZIP CODE	
NAME		% OF INTEREST	% OF INTEREST IN LLC	
ADDRESS	CITY	STATE	ZIP CODE	

 ADDRESS
 CITY
 STATE
 ZIP CODE

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