

Non Substantive Change Request

Approved By

Randy Cole

Approved Date

7/24/2013 10:04:04 AM

Controlling Board Number

DMH0100312

Agency Code Submitted From

DMH01

User Submitted By

Lashawna.Marshall

Shortitle

Non-Substantive Change to CB DMH0100312

Change Description

Vendor Information change:Change of Vendor Id.Originally used the Vendor Id for Grant Riverside Methodist Hospitals.The correct Vendor Id on this Operating Request should be:0000163022, which is solely for Riverside Methodist Hospital.Please notify me with this non-substantive change has been made to Operating Request CB DMH0100312.Agency contact:LaShawna Marshall, LaShawna.Marshall@mha.ohio.gov, 614-644-8444.