**APPENDIX 2 – CERTIFICATION MEMO**

LETTER HEAD

### OFFICE SYMBOL

MEMORANDUM FOR **[Put in correct addressee for your Service]**

SUBJECT: Uniform Business Office Compliance Plan

1. In accordance with the **[NAME YOUR SERVICE]** electronic message traffic directing each medical treatment facility (MTF) to prepare and submit an MTF Uniform Business Office (UBO) Compliance Plan enclosed is the ################## Compliance Plan, dated/updated as of ###########.

2. The point of contact for matters pertaining to this document is ##############, UBO Compliance Officer, ###-####.

Encl

SIGNATURE BLOCK

MTF COMMANDER