

1       **HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF**  
2       **1996 COMPLIANCE: BUSINESS ASSOCIATE (BA) AGREEMENT**

3       THIS BUSINESS ASSOCIATE AGREEMENT (“AGREEMENT”) is entered into by and between Florida  
4       Healthy Kids Corporation, a Florida non-profit corporation, (“FHKC” or “Covered Entity”) and  
5       \_\_\_\_\_ (the “BA”), and is incorporated in the Contract or other Ancillary Agreement (“Contract”)  
6       between FHKC and \_\_\_\_\_.

7  
8       **HIPAA COMPLIANCE**

9       FHKC and BA agree to comply with the Health Insurance Portability and Accountability Act of 1996, Pub.  
10      L. No. 104-191, as amended from time to time (“HIPAA”) and the Health Information Technology for  
11      Economic and Clinical Health Act (“HITECH”).

12      FHKC and BA enter into this Agreement to comply with the requirements of the implementing regulations  
13      at 45 Code of Federal Regulations (C.F.R) Parts 160-164 for the Administrative Simplification provisions  
14      of Title II, Subtitle F of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), and the  
15      requirements of the Health Information Technology for Economic and Clinical Health Act, as incorporated  
16      in the American Recovery and Reinvestment Act of 2009 (HITECH), that are applicable to business  
17      associates, along with any guidance and/or regulations issued by Department of Health and Human  
18      Services (“HHS”). FHKC and BA agree to incorporate into this agreement any regulations issued with  
19      respect to the HITECH Act that relate to the obligations of business associates. BA recognizes and  
20      agrees that it is directly obligated by law, through the Contract, and through any other written agreement  
21      and this Agreement to meet the applicable provisions of HIPAA and HITECH.

22  
23      **DEFINITIONS FOR USE IN THIS ATTACHMENT**

24      Terms used but not otherwise defined in this Agreement and the Contract shall have the same meaning  
25      as those terms in 45 C.F.R. Parts 160, 162 and 164.

26      **OBLIGATIONS AND ACTIVITIES OF BUSINESS ASSOCIATE (PRIVACY RULE)**

27      **Operation on Behalf of FHKC**

28      The BA shall use and disclose Protected Health Information (“PHI”) only as shall be permitted by the  
29      Contract and this Agreement. BA shall have the same duty to protect FHKC’s PHI as such term is  
30      defined in the Contract, and in furtherance of the duties therein.

31      **Compliance with the Privacy Rule**

32      BA agrees to fully comply with the requirements under the Standards for Privacy of Individually  
33      Identifiable Health Information (“Privacy Rule”) applicable to “business associates,” as that term is defined  
34      in the Privacy Rule, and not use or further disclose PHI other than as permitted or required by the  
35      Contract, this Agreement or as required by law.

36      BA shall create and/or adopt policies and procedures to periodically audit BA’s adherence to all HIPAA  
37      and HITECH regulations. BA acknowledges and promises to perform such audits pursuant to the terms

38 and conditions set out herein. BA shall make such audit policies and procedures available to FHKC for  
39 review.

#### 40 **Privacy Safeguards and Policies**

41 BA agrees to use appropriate safeguards to prevent use or disclosure of PHI other than as provided for  
42 by the Contract, any Ancillary Agreement(s), this Agreement, or as required by law.

#### 43 **Mitigation of Harmful Effect of Violations**

44 BA agrees to inform FHKC without unreasonable delay and mitigate, to the extent practicable, any  
45 harmful effect that is known to BA of a use or disclosure of PHI by BA, or by a subcontractor or agent of  
46 BA, resulting from a violation of the requirements of this Agreement.

#### 47 **Privacy Obligations Breach and Security Incidents**

##### 48 **Privacy Breach**

49 BA will report to FHKC, immediately following discovery and without unreasonable delay, any use or  
50 disclosure of FHKC's Protected Health Information not permitted by this Agreement or in writing by FHKC.  
51 In addition, BA will report, immediately following discovery and without unreasonable delay, but in no  
52 event later than seven (7) business days following discovery, any "Breach" of "Unsecured Protected  
53 Health Information" as these terms are defined by the HITECH Act and any implementing regulations,  
54 notwithstanding whether BA has made an internal risk analysis and determined that no notification is  
55 required. BA shall cooperate with FHKC in investigating the Breach and in meeting FHKC's obligations  
56 under the HITECH Act and any other security breach notification laws. In the event of a breach, BA and  
57 FHKC will work together to comply with any required regulatory filings.

58 Any such report shall include the identification (if known) of each individual whose unsecured PHI has  
59 been, or is reasonably believed by BA to have been, accessed, acquired, or disclosed during such  
60 Breach. BA will make the report to FHKC's Privacy Officer not more than seven (7) business days after  
61 BA learns of such non-permitted use or disclosure.

62 Any items not known at the time of the initial report will be subsequently reported to FHKC as answers  
63 are determined. All elements will be reported no later than 30 days after the date of the initial report, or as  
64 soon as feasible, whichever is sooner.

##### 65 **Access of Individual to PHI and other Requests to Business Associate**

66 If BA receives PHI from FHKC in a designated record set, BA agrees to provide access to PHI in a  
67 designated record set to FHKC in order to meet its requirements under 45 CFR § 164.524. If BA receives  
68 a request from an individual for a copy of the individual's PHI, and the PHI is in the sole possession of the  
69 BA, BA will provide the requested copies to the individual and notify FHKC of such action within five (5)  
70 business days of completion of the request. If BA receives a request for PHI in the possession of FHKC,  
71 or receives a request to exercise other individual rights as set forth in the Privacy Rule, BA shall promptly  
72 forward the request to FHKC within two (2) business days. BA shall then assist FHKC as necessary in  
73 responding to the request in a timely manner. If a BA provides copies of PHI to the individual, it may  
74 charge a reasonable fee for hard copies as the regulations shall permit. If requested, BA shall provide  
75 electronic copies as required by law.

76 **Recording of Designated Disclosures of PHI**

77 BA agrees to document disclosures of PHI and information related to such disclosures as would be  
78 required for FHKC to respond to a request by an Individual for an accounting of disclosures of PHI in  
79 accordance with 45 CFR § 164.528.

80

81 **Security and Privacy Compliance Review upon Request**

82

83 **HHS Inspection**

84 BA shall make its internal practices, books and records relating to the Use and Disclosure of PHI  
85 available to the HHS for purposes of determining Covered Entity's compliance with HIPAA and HITECH.  
86 Except to the extent prohibited by law, BA agrees to notify FHKC of all requests served upon BA for  
87 information or documentation by or on behalf of the HHS. BA shall provide to FHKC a copy of any PHI  
88 that BA provides to the HHS concurrently with providing such PHI to the HHS.

89 **FHKC Inspection**

90 Upon written request, BA agrees to make available to FHKC during normal business hours BA's internal  
91 practices, books, and records relating to the use and disclosure of PHI or EPHI received from, or created  
92 or received on behalf of, FHKC in a time and manner designated by FHKC for the purposes of FHKC  
93 determining compliance with the HIPAA Privacy and Security Requirements.

94 **OBLIGATIONS AND ACTIVITIES OF BUSINESS ASSOCIATE (SECURITY RULE)**

95 **Compliance with Security Rule**

96 BA shall ensure compliance with the HIPAA Security Standards for the Protection of Electronic Protected  
97 Health Information ("EPHI"), 45 C.F.R. Part 160 and Part 164, Subparts A and C (the "Security Rule"),  
98 with respect to Electronic Protected Health Information covered by the Contract and this Agreement  
99 effective on the compliance date for initial implementation of the security standards set for in 45 C.F.R.  
100 §164.318.

101 **Security Safeguards and Policies**

102 BA agrees to implement administrative, physical, and technical safeguards that reasonably and  
103 appropriately protect the confidentiality, integrity, and availability of the electronic PHI that it creates,  
104 receives, maintains, or transmits on behalf of FHKC as required by the Security Rule. The BA will  
105 maintain appropriate documentation of its compliance with the Security Rule. These safeguards will  
106 include, but shall not be limited to:

- 107 • Annual training to relevant employees, contractors and subcontractors on preventing improper  
108 use or disclosure of PHI, updated as appropriate;
- 109 • Adopting policies and procedures regarding the safeguarding of PHI, updated and enforced as  
110 necessary;
- 111 • Implementing appropriate technical and physical safeguards to protect PHI, including access  
112 controls, transmission security, workstation security, etc.

113

114 **Security Provisions in Business Associate Contracts**

115 BA shall ensure that any agent, including a subcontractor, to whom it provides electronic PHI received  
116 from, maintained, or created for FHKC or that carries out any duties for the BA involving the use, custody,  
117 disclosure, creation of, or access to PHI supplied by FHKC, shall execute a bilateral contract (or the  
118 appropriate equivalent if the agent is a government entity) with BA, incorporating the same restrictions  
119 and conditions in this Agreement with BA regarding PHI.

120 **Florida Consumer Notice of System Breach**

121 BA understands that FHKC or its customers may be a "information holder" (as may be BA) under the  
122 terms of section 817.5681, *Florida Statutes*, and that in the event of a breach of the BA's security system  
123 as defined by that statute, the BA shall indemnify and hold FHKC harmless for expenses and/or damages  
124 related to the breach. Such obligation shall include, but is not limited to, the mailed notification to any  
125 Florida resident whose personal information is reasonably believed to have been acquired by an  
126 unauthorized individual. In the event that the BA discovers circumstances requiring notification of more  
127 than one thousand (1,000) persons at one time, the person shall also notify, without unreasonable delay,  
128 all consumer reporting agencies and credit bureaus that compile and maintain files on consumers on a  
129 nationwide basis, as defined by section 817.5681(12), *Florida Statutes*, of the timing, distribution and  
130 content of the notices. Substitute notice, as defined by section 817.5681(6)(c), *Florida Statutes*, shall not  
131 be permitted except as approved in writing in advance by FHKC. The parties agree that PHI includes data  
132 elements in addition to those included described as "personal information" under section 817.5681,  
133 *Florida Statutes*, and agree that BA's responsibilities under this paragraph shall include all PHI.

134 **Reporting of Security Incidents**

135 The BA shall track all "Security Incidents" as defined by HIPAA and shall periodically report such security  
136 incidents in summary fashion as may be requested by FHKC, but not less than annually within sixty (60)  
137 days of each anniversary of this Agreement. The BA shall reasonably use its own vulnerability  
138 assessment of damage potential and monitoring to define levels of Security Incidents and responses for  
139 BA's operations. However, the BA shall expediently notify FHKC's Privacy Officer of any "Security  
140 Incident" which would constitute a "Security Event" as defined by this Agreement, including any "breach of  
141 the security of the system" under section 817.5681, *Florida Statutes*, in a preliminary report within two (2)  
142 business days, with a full report of the incident not less than five (5) business days of the time it became  
143 aware of the incident. The BA shall likewise notify FHKC in a preliminary report within two (2) business  
144 days of any unauthorized acquisition including but not limited to internal user access to non-test records  
145 reported to BA's privacy manager, and any use, disclosure, modification, or destruction of PHI by an  
146 employee or otherwise authorized user of its system of which it becomes aware with a full report of the  
147 incident not less than five (5) business days from the time it became aware of the incident.

148 BA shall identify in writing key contact persons for administration, data processing, marketing, information  
149 systems and audit reporting within thirty (30) days of the execution of this Agreement. BA shall notify  
150 FHKC of any reduction of in-house staff during the term of this Agreement, in writing, within ten (10)  
151 business days.

152 **HITECH Act**

153 BA will adhere to all Privacy and Security provisions in the HITECH Act as passed as part of the  
154 American Recovery and Reinvestment Act of 2009 ("ARRA") under Sections 13401 and 13404.

155 **Unsecured Protected Health Information**

156 BA shall notify each individual whose Unsecured Protected Health Information has been or is reasonably  
157 believed by the BA to have been accessed, acquired, used, or disclosed as a result of a breach, except  
158 when law enforcement requires a delay pursuant to 45 CFR 164.412.

159 BA shall notify such individuals without unreasonable delay, and in no case later than sixty (60) days after  
160 discovery of the breach, as follows:

- 161 • By written notice in plain language including, to the extent possible:
- 162 ○ A brief description of what happened, including the date of the breach and the date of the  
163 discovery of the breach, if known;
  - 164 ○ A description of the types of Unsecured Protected Health Information involved in the  
165 breach (including but not limited to items such as whether full name, social security  
166 number, date of birth, home address, account number, diagnosis, disability code, or other  
167 types of information were involved);
  - 168 ○ Any steps individuals should take to protect themselves from potential harm resulting  
169 from the breach;
  - 170 ○ A brief description of what BA and FHKC are doing to investigate the breach, to mitigate  
171 the harm to individuals, and to protect against further breaches; and
  - 172 ○ Contact procedures for individuals to ask questions or learn additional information, which  
173 shall include a toll-free telephone number, an email address, website or postal address.
- 174 • BA must use a method of notification that meets the requirements of 45 CFR 164.404(d).
- 175 • BA must provide notice to the media when required under 45 CFR 164.406, and to HHS pursuant  
176 to 45 CFR 164.408.
- 177

178 **ELECTRONIC TRANSACTION AND CODE SETS**

179 To the extent that the services performed by BA pursuant to the Agreement involve transactions that are  
180 subject to the HIPAA Standards for Electronic Transactions and Code Sets, 45 C.F.R. Parts 160 and 162,  
181 with respect to Electronic Protected Health Information covered by the Contract and this Agreement, BA  
182 shall conduct such transactions in conformance with such regulations as amended from time to time.  
183 Without limiting the generality of the foregoing, BA also agrees that it will, in accordance with 45 C.F.R. §  
184 162.923(c), comply with all applicable requirements of 45 C.F.R. Part 162, and require any agent or  
185 subcontractor to comply with all applicable requirements of 45 C.F.R. Part 162.

186 **PERMITTED USES AND DISCLOSURES BY BA – GENERAL USE AND DISCLOSURE PROVISIONS**

187 **Use of PHI for Operations on Behalf of FHKC**

188 Except as otherwise limited by this Agreement, BA may use or disclose PHI to perform functions,  
189 activities, or services for, or on behalf of, FHKC as specified in the Contract, provided that such use or  
190 disclosure would not violate HIPAA if done by FHKC, or violate other policies and procedures of FHKC.

191 Except as otherwise provided in the Contract or this Agreement, BA is prohibited from further using or  
192 disclosing any information received from FHKC, or from any other business associate of FHKC for any  
193 commercial purposes of the BA, including, by way of example, “data mining.”

194 BA shall only request, use and disclose the minimum amount of PHI necessary to accomplish the  
195 purposes of the request, use or disclosure.

196 **PERMITTED USES AND DISCLOSURES BY BA – SPECIFIC USE AND DISCLOSURE PROVISIONS**

197 **Third Party Disclosure Confidentiality**

198 Except as otherwise limited in the Contract or this Agreement, BA may disclose PHI for the proper  
199 management and administration of the BA, provided that disclosures are required by law, or, if permitted  
200 by law, this Agreement, the Contract and any Ancillary Agreements, provided that, if BA discloses any  
201 PHI to a third party for such a purpose, BA shall enter into a written agreement with such third party  
202 requiring the third party to: (a) maintain the confidentiality, integrity, and availability of PHI and not to use  
203 or further disclose such information except as Required By Law or for the purpose for which it was  
204 disclosed, and (b) notify BA of any instances in which it becomes aware in which the confidentiality,  
205 integrity, and/or availability of the PHI is breached in a preliminary report within two (2) business days with  
206 a full report of the incident not less than five (5) business days from the time it became aware of the  
207 incident.

208 **Data Aggregation Services**

209 Except as otherwise limited in this Agreement, BA may use PHI to provide Data Aggregation Services to  
210 FHKC as permitted by 42 CFR § 164.504(e)(2)(I)(B).

211 **PROVISIONS FOR FHKC TO INFORM BA OF PRIVACY PRACTICES AND RESTRICTIONS**

212 **Notice of Privacy Practices**

213 FHKC shall provide BA with the notice of Privacy Practices produced by FHKC or provided to FHKC as a  
214 result of FHKC's obligations with other organizations in accordance with 45 CFR § 164.520, as well as  
215 any changes to such notice.

216 **Notice of Changes in Individual's Access or PHI**

217 FHKC shall provide BA with any changes in, or revocation of, permission by an Individual to use or  
218 disclose PHI, if such changes affect BA's permitted or required uses.

219 **Notice of Restriction in Individual's Access or PHI**

220 FHKC shall notify BA of any restriction to the use or disclosure of PHI that FHKC has agreed to in  
221 accordance with 45 CFR § 164.522, to the extent that such restriction may affect BA's use of PHI.

222 **TERM AND TERMINATION**

223 **Term**

224 The Term of this Attachment shall be effective concurrent with the Contract, and shall terminate when all  
225 of the PHI provided by FHKC to BA, or created or received by BA on behalf of FHKC, is destroyed or  
226 returned to FHKC, or, if it is not feasible to return or destroy PHI, protections are extended to such  
227 information, in accordance with the termination provisions in this section.

228 **Termination for Cause**

229 This Agreement authorizes and BA acknowledges and agrees FHKC shall have the right to immediately  
230 terminate this Agreement in the event BA fails to comply with, or violates a material provision of this  
231 Agreement or any provision of the Privacy and Security Rules. Notwithstanding the aforementioned, BA  
232 shall not be relieved of liability to FHKC for damages sustained by virtue of any breach of this Agreement  
233 by BA.

234 **Effect of Termination; Return of Protected Health Information**

235 Upon termination of this Agreement for any reason, except as provided in subsections below, BA shall, at  
236 its own expense, either return and/or destroy all PHI and other confidential information received from  
237 FHKC or created or received by BA on behalf of FHKC. This provision applies to all confidential  
238 information regardless of form, including but not limited to electronic or paper format. This provision shall  
239 also apply to PHI and other confidential information in the possession of sub-contractors or agents of BA.

240 The BA shall consult with FHKC as necessary to assure an appropriate means of return and/or  
241 destruction of PHI, and shall notify FHKC in writing when such destruction is complete. If PHI is to be  
242 returned, the parties shall document when all information has been received by FHKC.  
243

244 The BA shall notify FHKC whether it intends to return and/or destroy the confidential information with  
245 such additional detail as requested. In the event BA determines that returning or destroying the PHI and  
246 other confidential information received by or created for FHKC at the end or other termination of this  
247 Agreement is not feasible, BA shall provide to FHKC notification of the conditions that make return or  
248 destruction not feasible.

249 **MISCELLANEOUS**

250 **Severability**

251 If any of the provisions of this Agreement shall be held by a court of competent jurisdiction to be  
252 no longer required by the Privacy Rule or the Security Rule, the parties shall exercise their best  
253 efforts to determine whether such provisions shall be retained, replaced or otherwise modified.

254 **Cooperation**

255 The parties agree to cooperate and to comply with procedures mutually agreed upon to facilitate  
256 compliance with the Privacy Rule and Security Rule, including procedures designed to mitigate  
257 the harmful effects of any improper use or disclosure of PHI.

258

259 **Regulatory Reference**

260 Any reference in this Agreement to a section in the Privacy and/or Security Rule means those provisions  
261 currently in effect or as may be amended in the future.

262 **Modification and Amendment**

263 This Agreement may be modified only by express written amendment executed by all Parties hereto. The  
264 Parties agree to take such action to amend this Agreement from time to time as is necessary for FHKC to  
265 comply with the requirements of the Privacy and Security Rules, HIPAA and HITECH.

266 **Survival**

267 The respective rights and obligations of BA under Paragraph VIII, "Term and Termination" of this  
268 Agreement shall survive the termination of this Agreement and the Contract.

269 **Interpretation**

270 Any ambiguity in this Agreement or the Contract shall be resolved so as to permit FHKC to comply with  
271 HIPAA and HITECH.

272

273 **REMAINDER OF THIS PAGE LEFT INTENTIONALLY BLANK**

274 **TWO (2) SIGNATURE PAGES FOLLOW**

275

276

277



278 IN WITNESS WHEREOF, the Parties have caused this BUSINESS ASSOCIATE AGREEMENT, to be  
279 executed by their undersigned officials as duly authorized.

280  
281 **FOR**  
282 **ENTITY:**  
283

284

285 \_\_\_\_\_

286 **NAME:**  
287 **TITLE:**  
288 **DATE SIGNED:**  
289

290 \_\_\_\_\_

291 **WITNESS #1 SIGNATURE**

292

293 \_\_\_\_\_

294 **WITNESS #1 PRINT NAME**

295

296

297 \_\_\_\_\_

298 **WITNESS #2 SIGNATURE**

299

300 \_\_\_\_\_

301 **WITNESS #2 PRINT NAME**

302

303

304 **FOR**  
305 **FLORIDA HEALTHY KIDS CORPORATION:**  
306  
307 \_\_\_\_\_

308 **NAME:**  
309 **TITLE:**           **Executive Director**  
310 **DATE SIGNED:**  
311

312 \_\_\_\_\_

313 **WITNESS #1 SIGNATURE**

314  
315 \_\_\_\_\_

316 **WITNESS #1 PRINT NAME**

317  
318  
319 \_\_\_\_\_

320 **WITNESS #2 SIGNATURE**

321  
322 \_\_\_\_\_

323 **WITNESS #2 PRINT NAME**

324

325 **NOTIFICATION TO THE FHKC OF BREACH OF UNSECURED PROTECTED HEALTH INFORMATION**

Contract Information	
Contract Number	Contract Title
Contract Contact Information	
Contact Person For This Incident:	
Contact Person's Title:	
Contact's Address	
Contact's Email:	
Contact's Telephone No:	

326 Business Associate hereby notifies FHKC that there has been a Breach of Unsecured (unencrypted)  
 327 Protected Health Information that Business Associate has used or has had access to under the terms of  
 328 the Business Associate Agreement, as described in detail below:

Breach Detail	
Date of Breach	Date of Discovery of Breach
Information about the Breach	
<b>Type of Breach:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Lost or stolen laptop, computer, flash drive, disk, etc.</li> <li><input type="checkbox"/> Stolen password or credentials</li> <li><input type="checkbox"/> Unauthorized access by an employee or contractor</li> <li><input type="checkbox"/> Unauthorized access by an outsider</li> <li><input type="checkbox"/> Other (describe)</li> </ul>	
Detailed Description of the Breach	

**Types of Unsecured Protected Health Information involved in the breach (such as Full Name, SSN, Date of Birth, Address, Account Number, Disability Code, etc).**

<p><b>Personal Information:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Name</li> <li><input type="checkbox"/> Address</li> <li><input type="checkbox"/> Date of birth</li> <li><input type="checkbox"/> Social Security number</li> <li><input type="checkbox"/> Drivers license or identification card number</li> <li><input type="checkbox"/> Financial insurance information (credit card number, bank account number, etc)</li> <li><input type="checkbox"/> Health insurance information (insurance carrier, insurance card number, etc)</li> <li><input type="checkbox"/> Other Personal or Health Information (describe):</li> </ul>	<p><b>Health Information:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Basic information (age, sex, height, etc)</li> <li><input type="checkbox"/> Disease or medical conditions</li> <li><input type="checkbox"/> Medications</li> <li><input type="checkbox"/> Treatments or procedures</li> <li><input type="checkbox"/> Immunizations</li> <li><input type="checkbox"/> Allergies</li> <li><input type="checkbox"/> Information about children</li> <li><input type="checkbox"/> Test results</li> <li><input type="checkbox"/> Hereditary conditions</li> <li><input type="checkbox"/> Mental health information</li> <li><input type="checkbox"/> Information about diet, exercise, weight, etc)</li> <li><input type="checkbox"/> Correspondence between patient, or medical power of attorney</li> <li><input type="checkbox"/> Organ donor authorization</li> </ul>
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**What steps are being taken to investigate the breach, mitigate losses, and protect against any further breaches?**

**List any law enforcement agencies you've contacted about the breach**

<b>Number of Individuals Impacted</b>	<b>If over 500, do individuals live in multiple states?</b>	
	<b>Yes</b>	<b>No</b>

**Breach Notification**

<b>Have you made the breach public?</b>	<b>If YES, when did you make it public</b>
---	--

Yes	No	
<p>Have you notified the people whose information was breached?</p> <p><input type="checkbox"/> YES. We notified them on: Attach a copy of the letter to this form. Don't include any personally identifiable information, other than your own contact information.</p> <p><input type="checkbox"/> NO. Our investigation isn't complete.</p>		
Comments		
<p>1.</p> <p>2.</p>		

329

330

331

332 **Submitted By:**

**Date of Submission:**

333

334

\_\_\_\_\_

\_\_\_\_\_

335

336