



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Long-Term Support Administration
PO Box 45600, Olympia, WA 98504-5600

April 14, 2020

REGULAR MAIL

Licensee, Anthony Jones
Sunshine Place
652 S Arthur Street
Spokane, WA 99202

Adult Family Home License #217501

REDUCTION OF CIVIL FINE

Dear Licensee:

Subsequent to a settlement agreement, the findings and the Department's actions are as follows:

The civil fine imposed on your adult family home on October 24, 2019, in the amount of \$3,000.00 is reduced to \$2,000.00.

**WAC 388-76-10915(1)(a)(2) Department staff access Willful interference \$3,000.00
prohibited.**

Please remit a check for \$2,000.00 payable to the Department of Social and Health Services, and if you have or have had a Medicaid resident(s), please include your ProviderOne ID Number # on the check, to:

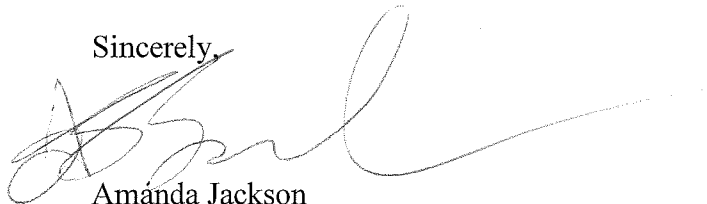
**DSHS Office of Financial Recovery
PO Box 49501
Olympia, Washington 98504-9501
1-800-562-6114**

If payment has not been received within twenty-eight (28) days after receipt of this notice, interest will begin to accrue on the balance at the rate of one percent per month. If you do not make payment within twenty-eight (28) days, the balance due the department will be recovered.

Anthony Jones
Sunshine Place
License #217501
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If you have any questions, please contact Carmen Church, Compliance Specialist, at (509) 323-7321.

Sincerely,

A handwritten signature in black ink, appearing to read 'Amanda Jackson', written in a cursive style.

Amanda Jackson
Compliance Specialist
Residential Care Services

cc: Field Manager, Region 1, Unit E
RCS Regional Administrator, Region 1
HCS Regional Administrator, Region 1
DDA Regional Administrator, Region 1
WA LTC Ombuds
Office of Financial Recovery, Vendor Program Unit
HQ Central Files
DRW
cb