

August 7, 2015

To Whom It May Concern

We are pleased to offer you the position of [REDACTED] at Lake Region Medical's [REDACTED] facility, reporting. The general terms of your employment offer, including compensation and benefits, are described below:

- You will be paid [REDACTED] per hour, paid bi-weekly, [REDACTED] annualized (based on a 40 hour work-week), less applicable withholds. Your salary and performance will be reviewed on a periodic basis consistent with the procedures used by the company for other similarly situated employees.
- Your target start date is [REDACTED]
- Subject to the terms and conditions of eligibility, you will be eligible to participate in the benefit plans generally made available to [REDACTED] employees, as amended from time to time. Such benefits currently include medical and dental coverage, a 401k plan, life and disability insurance coverage, Section 125 Flexible Spending Plan and other programs.
- You will be eligible to begin accruing 120 hours of Paid Time Off (PTO) per year, prorated from the first of the month following your date of hire and pursuant to the company's PTO policy.

This offer is contingent upon the following:

- Signed acceptance of this offer on or before August 10, 2015.
- Passing the required drug screen, reference and background check prior to your start date. You will be required to sign appropriate authorizations in connection with such screening and background checks.
- Completion of 2 to 3 positive professional references.
- Signed acceptance of Lake Region Medical's Non-Disclosure, Non-Solicitation, Non-Competition and Invention Assignment agreement (a copy of which is enclosed).
- The federal government requires all employers to verify an employee's eligibility to work in the United States. Please bring with you on your first day of employment documentation to prove your work eligibility status.

This letter shall not be construed as an agreement to employ you for any stated term, and shall in no way alter Lake Region Medical's policy of employment at will, under which both you and Lake Region Medical may end the employment relationship, for any reason, at any time, with or without notice.

By signing this offer letter you represent that you are not bound by any employment contract, restrictive covenant such as a non-compete or other restriction preventing you from entering into employment with Lake Region Medical. Furthermore, you are not bound by any agreement that will prevent you from carrying out your responsibilities for Lake Region Medical, or which is in any way inconsistent with the terms of this letter.

we believe you have the knowledge, experience, and business acumen necessary to make a significant contribution to Lake Region Medical. We look forward to working with you.

Please do not hesitate to contact me if you have any questions.

Sincerely,

AGREED TO AND ACCEPTED BY:

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Date