



Anonymous Incident Disclosure Form

Check all that apply:

Privacy Incident
Security Incident

Ethics Incident
Other

Instructions for completing this form:

Enter the Date the Incident/Issue/Concern occurred.

Enter the Plan name (if applicable) and location where the incident/issue/concern occurred.

Document the Nature of the incident/issue/concern.

Ensure the completed form is delivered to an appropriate individual as described below.

Should you not want to remain anonymous, you may still utilize this form, but simply include your name and contact information

Date of incident/issue/concern.

Name of person completing the form
(optional)

Date incident/issue concern reported.

Plan name (if applicable) and location

Nature of Incident/Issue/Concern

This form when completed may be faxed anonymously to the Compliance Officer at 617-886-1390. Some examples of anonymous delivery would be interoffice mail or placing under office door. Do not use e-mail.