



April 1, 2015

Advanced Gastroenterology of Monterey County
3151 Ocean Terrace Lane
Marina, CA 93933

RE: Professional and Call Coverage Services Agreement

Dear Dr. Tabbaa:

The purpose of this letter is to acknowledge that the parties hereby agree to terminate the Professional and Call Coverage Services Agreement effective as of August 1, 2011; assigned on November 29, 2011 and amended effective August 1, 2012. The effective date of termination will be March 31, 2015.

Your signature below and return of a copy of this letter to Natividad Medical Center Medical Staff Office will indicate that you have read and agree with the terms. Should you have any questions, please do not hesitate to contact me. I have enclosed two original copies of this letter for your signature. Please sign both, retain one copy for your file and return a copy to me.

Sincerely,

Deputy Purchasing Agent
Natividad Medical Center

Accepted and agreed to on this
___ day of _____ 2015

Mumtaz Tabbaa M.D.

1441 Constitution Boulevard
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Salinas, CA 93912-1611
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