Community Ties of America, Inc 500 Ala Moana Blvd, Suite 7400 Honolulu, Hawaii 96813

Address:1449 Brigham Street Honolulu, HI 96817

Adult Day Care Center (ADCC)			
Deficiency Report			
Date of Inspection:07/31/2025		Date Plan of Correction is Due:	Type of Inspection (circle one): RECERT or ANNUAL or NEW
Check Item	H.A.R. 17-1424 Chapter #	Chapter Heading	Rule # and Non-Compliant findings
Х	3 .	Application for Certificate of Approval	
Х	11	Administration	
Х	12	Personnel and Staffing	
Х	13	Admissions	-
Х	14	Participant Fees	7
Х	15	Transportation	
Х	16	Services for Center Participants	
Х	17	Physical Location	
Х	18	Fire Protection	
Х	19	Other Disasters and Evacuations	
The CTA Compliance Manager has reviewed the above items with me and has provided me with a copy of this form. It is my responsibility to correct all items listed above and provide a written plan of correction to CTA within the timeframe stated above.			
If this box is checked then I understand that I met all requirements and no Plan of Correction is required			
PRINT NAME: ALLYSON FURUFAWA			
SIGNATURE: Date: 7/31/25			
Compliance Manager Signature: Date: 7/31/25			