

Organization category **Business or Non-profit**

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Number of employees range **20-49**

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Filing organization legal name **Alzheimer Society of Sarnia-Lambton**

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Filing organization business number (BN9) **119004513**

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Fields marked with an asterisk (\*) are mandatory.

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### **E. Accessibility compliance report summary**

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Your responses to the questions on your accessibility report indicate that your organization is in compliance with AODA standards. **Your organization may be audited to verify compliance.**