



2000 16<sup>th</sup> Street  
Denver, CO 80202  
(303) 405-2100  
www.davita.com

December 10, 2012

Dale Galassie  
Chairman  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, Illinois 62761

RECEIVED  
DEC 11 2012  
HEALTH FACILITIES &  
SERVICES REVIEW BOARD

RE: Total Renal Care Inc. d/b/a Cobblestone Dialysis  
836 Dundee Avenue, Elgin, IL. 60120  
Project #10-058  
Project Completion and Report of Final Realized Cost

Dear Chairman Galassie:

This letter is the Notice of Project Completion and Report of Final Realized Cost for the above-referenced project in accordance with the revised State Board Rule 1130.770 item b. The CON permit allowed the discontinuation of the existing 14-station dialysis facility known as Sherman Hospital Dialysis – Elgin and establishment of a new 14-station dialysis facility as noted above also in Elgin, Illinois.

Regarding project completion, Cobblestone Dialysis treated it first patient on May 21, 2012. Medicare certification was received with an effective date of coverage of November 21, 2012 (please refer to the letter in Attachment 1).

Regarding final realized costs, please compare the project's altered Original and Final Realized Source and Use of Funds Statements in Attachment 2. These statements provide detailed itemizations of all expenditures and sources of funds for this project. Final realized costs of CON #10-058 are \$2,420,770. These costs are the total costs recorded to complete the project. No additional or associated costs or capital expenditures are related to the project. *Please note that these costs are not submitted for reimbursement under Title XVIII or XIX of the Social Security Act.*

As the project constitutes a major construction project, with costs exceeding one million dollars, also refer to Attachment 3, the final Application and Certification for Payment for the construction contract, form G702 of the American Institute of Architects.

Please accept this letter as certification and verification of the above-mentioned information.

Sincerely,

Marcie Marcus Damisch  
Group General Counsel  
DaVita HealthCare Partners Inc.

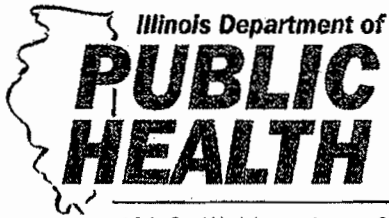
Subscribed and sworn to before me in the County of Denver, State of Colorado, this 10<sup>th</sup> day of December, 2012.

(Notary's official signature)

Seal

LINDA N. O'CONNELL  
NOTARY PUBLIC  
STATE OF COLORADO  
MY COMMISSION EXPIRES 06-08-2015

06-08-2015  
(Commission expiration date)



Pat Quinn, Governor  
LaMar Hasbrouck, MD, MPH, Director

122 S. Michigan Ave., Suite 700 • Chicago, IL 60603-8119 • www.idph.state.il.us

ATTACHMENT 1

October 23, 2012

**CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

Donna Provenzano/CEO  
Cobblestone Dialysis  
836 Dundee Ave  
Elgin, IL 60120

RE: CCN#: 142715  
Survey Date: 10/18/12  
Survey Type: Relocation

Dear Ms. Provenzano:

On 10/18/12, staff from the Illinois Department of Public Health (IDPH) conducted a Medicare survey at Cobblestone Dialysis.

Regulations at 42 CFR §494 require that a provider must be in compliance with the applicable Conditions of Participation for End Stage Renal Disease Facilities. Based on the survey results, IDPH has determined that Cobblestone Dialysis does not meet the requirements for participation and is not in compliance with the following standard level deficiencies:

- 42 CFR §494.30
- 42 CFR §494.90
- 42 CFR §494.140

Enclosed is form CMS-2567, Statement of Deficiencies, documenting the Standard-level deficiencies found during the survey. All deficiencies cited on the CMS-2567 require a Plan of Correction (PoC). You are required to respond within 10 days of receipt of this notice. Please indicate your corrective actions on the right side of the form CMS-2567 in the column labeled "Provider Plan of Correction," keying your responses to the deficiencies on the left. Additionally, indicate your anticipated completion dates in the column labeled "Completion Date."

An acceptable plan of correction must contain the following elements:

1. The plan for correcting each specific deficiency cited;
2. Efforts to address improving the processes that led to the deficiency cited;
3. The procedure for implementing the acceptable plan of correction for each deficiency cited;
4. A completion date for correction of each deficiency cited;
5. A description demonstrating how the hospital has incorporated systemic improvement actions into its Quality Assessment and Performance Improvement (QAPI) program in order to prevent the likelihood of the deficient practice from reoccurring;
6. Procedures for monitoring and tracking to ensure that the plan of correction is effective and that specific deficiencies cited remain corrected and/or in compliance with the regulatory requirements; and
7. The title of the person responsible for implementing the acceptable plan of correction.

ATTACHMENT 1

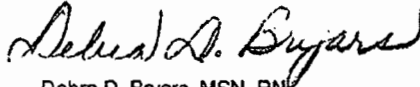
Please return the completed form CMS-2567 within 10 days of receipt of this notice. An authorized official of your facility must sign and date the bottom of the first page of the CMS-2567.

The PoC for the deficiencies must be submitted to:

Illinois Department of Public Health  
Division of Health Care Facilities and Programs  
Attn: **Annette Hodge, Supervisor**  
122 S. Michigan Avenue, 7<sup>th</sup> Floor  
Chicago, Illinois 60603

If you have any questions concerning this notice, please contact **Annette Hodge** at the address above or telephone (312) 793-2222. You may also telephone the Department's TTY number for the hearing impaired at 1-800-547-0466.

Sincerely,



Debra D. Bryars, MSN, RN  
Field Operations Administrator  
Division of Health Care Facilities and Programs

Enclosure: CMS-2567

cc: File

POC/DDB/1012/

***Improving public health, one community at a time***

*printed on recycled paper*

**ATTACHMENT 2**

**Use and Source of Funds**

<b>Cobblestone Dialysis</b>		<b>CON # 10-058</b>	
<b>Use of Funds</b>	<b>CON Costs</b>	<b>FINAL Costs</b>	<b>10/15/2012</b>
Preplanning costs <b>IHFPB Review Fee</b>	\$ 6,000	\$6,625	
Site Survey and Soil Investigation			
Site Preparation			
Off Site Work			
New Construction Contracts			
Modernization Contracts *	\$ 600,000	\$623,240	
Contingencies	\$ 48,884		
Architectural/Engineering Fees	\$ 53,000	\$50,192	
Consulting and Other Fees (CON & Legal)	\$ 64,500	\$37,770	
Movable or Other Equipment (not in construction contracts)	\$ 522,872	\$176,453	
Bond Issuance Expenses (project related)			
Net Interest Expense (project related)			\$39,590
Fair Market Value of Space to be leased	\$ 1,375,000	\$1,375,000	
Other Cost to be Capitalized (Utilities, Shipping, Signage & Taxes)	\$ 12,500	\$111,900	
Acquisition of building or other property (excluding Land)			
<b>ESTIMATED TOTAL USE OF FUNDS</b>	<b>\$ 2,682,756</b>	<b>\$2,420,770</b>	
<b>Source of funds</b>			
Cash and Securities	\$ 1,307,756	\$1,045,770	
Pledges			
Gifts and Bequests			
Bond Issuance (project related)			
Mortgages			
Leases (fair market value of shell)	\$ 1,375,000	\$1,375,000	
Government Appropriations			
Grants			
Other Funds and Sources			
<b>ESTIMATED TOTAL SOURCE OF FUNDS</b>	<b>\$ 2,682,756</b>	<b>\$2,420,770</b>	
NOTE: ITEMIZATION OF EACH LINE ITEM MUST BE PROVIDED AT ATTACHMENT-7, NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FROM.			

\* The fair market (FMV) of leased space is \$ 208.14/gsf, the Building's development cost of \$ 1,375,000 excluding land for 6,600 gross square foot (GSF) (see attached 7B).

# APPLICATION AND CERTIFICATION FOR PAYMENT AIA DOCUMENT G702

PAGE ONE OF 2

TO (OWNER): Total Renal Care, Inc.  
601 Hawaii Avenue  
El Segundo, CA 90245

PROJECT: DaVita Cobblestone Dialysis, Facility #5551 APPLICATION NO: 7  
836 Dundee Avenue  
Elgin, IL 60120

FROM (CONTRACTOR): The Dubs Company  
1699 East Chicago Street  
Elgin, IL 60120-4721

VIA (ARCHITECT): Studio GC  
1600 Golf Road, Suite 1000  
Rolling Meadows, IL 60008

Distribution to:  
OWNER  
ARCHITECT  
CONTRACTOR

PERIOD TO: 07/01/12

PROJECT NO: 10044

CONTRACT DATE: 06/08/11

CONTRACT FOR: Tenant Improvements

## CONTRACTOR'S APPLICATION FOR PAYMENT

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Orders approved in previous months by Owner		26862	
TOTAL		26862	
Approved this Month			
Number	Date Approved		
T1-4 - T1-16		9,735	11,433
TOTALS		36,397	11,433
Net change by Change Orders			24,964

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR:

State of: Illinois County of: Cook  
Subscribed and sworn to before me this July 2012  
Notary Public: *[Signature]*  
My Commission expires: August 1, 2012

By: *[Signature]* Date: 07/01/12

## ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED: \$ 662,364  
(Attach explanation if amount applied for.)  
ARCHITECT: **Jim Burke PM**

By: **Jim Burke PM** Date: 07/01/12

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable to the Contractor named herein. Issuance, payment and acceptance of payment are with prejudice to any rights of the Owner or Contractor under this Contract.

1. ORIGINAL CONTRACT SUM \$ 598,276
2. Net change by Change Orders \$ 24,964
3. CONTRACT SUM TO DATE (Line 1 + 2) \$ 623,240
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) \$ 623,240
5. RETAINAGE:
  - a. 0 % of Completed Work \$ 0  
(Column D + E on G703)
  - b. 0 % of Stored Material \$ 0  
(Column F on G703)
 Total Retainage (Lines 5a + 5b or Total in Column I of G703) \$ 0
6. TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total) \$ 623,240
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate) \$ 562,364
8. CURRENT PAYMENT DUE \$ 70,876
9. BALANCE TO FINISH, PLUS RETAINAGE (Line 3 less Line 6) \$ 0

Digitally signed by Jim Burke PM  
DN: cn=Jim Burke PM, o=DaVita,  
ou=IG, email=jimb@burke@davita.com, c=US  
Date: 2012.10.12 13:37:36 -05'00'

# CONTINUATION SHEET

AIA DOCUMENT G703

PAGE 2 OF 3 PAGES

AIA Document G702, APPLICATION AND CERTIFICATION FOR PAYMENT, containing Contractor's signed certification is attached.

APPLICATION NO: 7

APPLICATION DATE: 07/01/12

In tabulations below, amounts are stated to the nearest dollar.

PERIOD TO: 07/01/12

Use Column I on Contracts where variable retainage for line items may apply.

ARCHITECT'S PROJECT NO: 10044

A ITEM NO.	B DESCRIPTION OF WORK	C SCHEDULED VALUE	D WORK COMPLETED		E THIS PERIOD	F MATERIALS PRESENTLY STORED (NOT IN DOR E)	G TOTAL COMPLETED AND STORED TO DATE (D+E+F)	H BALANCE TO FINISH (C - G)	I RETAINAGE (IF VARIABLE RATE)
			FROM PREVIOUS APPLICATION (D + E)	% (G + C)					
	Alltech Plumbing	125,850	125,850				125,850	0	0
	Classic Air (hvac)	49,300	49,300				49,300	0	0
	The Right Approach (electrical)	92,200	92,200				92,200	0	0
	Dubs Co. (OH&P)	25,570	25,570				25,570	0	0
	Dubs Co. (general conditions)	59,665	59,665				59,665	0	0
	Floor prep allowance	6,200		6,200			6,200	0	0
	Permit allowance	5,000		5,000			5,000	0	0
	Final cleaning	2,500		2,500			2,500	0	0
	Nu-Mill (brackets)	2,500		2,500			2,500	0	0
	WKL (millwork)	38,510		38,510			38,510	0	0
	Bane Nelson (doors, frames, hdwe)	17,465		17,465			17,465	0	0
	Dubs Co. (auto door)	5,270		5,270			5,270	0	0
	DeKalb Glazing	7,680		7,680			7,680	0	0
	IBEK	114,846		114,846			114,846	0	0
	T & M Flooring	15,546		15,546			15,546	0	0
	Executive Installations (epoxy floor)	4,950		4,950			4,950	0	0
	Capitol Decorating (painting)	10,615		10,615			10,615	0	0
	Dubs Co. (FRP)	6,100		6,100			6,100	0	0
	Interior Steel (lockers)	1,930		1,930			1,930	0	0
	CSI (accessories)	2,994		2,994			2,994	0	0
	All Star Drapery (blinds)	3,585		3,585			3,585	0	0
	Change Order #1	20,766		20,766			20,766	0	0
	Change Order #2	289		289			289	0	0
	Change Order #3	5,607		5,607			5,607	0	0
	<b>GRAND TOTALS</b>	624,938	613,738	11,200	0	624,938	100%	0	0

Users may obtain validation of this document by requesting of the license a completed AIA Document D401 - Certification of Document's Authenticity

# CONTINUATION SHEET

AIA DOCUMENT G703

PAGE 3 OF 3 PAGES

AIA Document G702, APPLICATION AND CERTIFICATION FOR PAYMENT, containing Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column 1 on Contracts where variable retainage for line items may apply.

APPLICATION NO: 7  
 APPLICATION DATE: 07/01/12  
 PERIOD TO: 07/01/12  
 ARCHITECT'S PROJECT NO: 10044

A ITEM NO.	B DESCRIPTION OF WORK	C SCHEDULED VALUE	D		E WORK COMPLETED THIS PERIOD	F MATERIALS PRESENTLY STORED (NOT IN D OR E)	G TOTAL COMPLETED AND STORED TO DATE (D+E+F)	H BALANCE TO FINISH (C - G)	I RETAINAGE (IF VARIABLE RATE)
			FROM PREVIOUS APPLICATION (D + E)	WORK COMPLETED THIS PERIOD					
	From previous page	624,938	613,738	11,200			624,938	0	0
	Change Order #4	1,575		1,575			1,575	0	0
	Change Order #5	380		380			380	0	0
	Change Order #6	1,911		1,911			1,911	0	0
	Change Order #7	178		178			178	0	0
	Change Order #8	441		441			441	0	0
	Change Order #9	2,276		2,276			2,276	0	0
	Change Order #10	681		681			681	0	0
	Change Order #11	615		615			615	0	0
	Change Order #12	899		899			899	0	0
	Change Order #13	65		65			65	0	0
	Change Order #14	(233)		(233)			(233)	0	0
	Change Order #15	(11,200)		(11,200)			(11,200)	0	0
	Change Order #16	714		714			714	0	0
	<b>GRAND TOTALS</b>	623,240	613,738	9,502			623,240	0	0

Users may obtain validation of this document by requesting of the license a completed AIA Document D401 - Certification of Document's Authenticity

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish general construction for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of seventy thousand, eight hundred seventy six dollars & no cents (\$70,876.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July, 2012, and seal this

Signature and Seal [Handwritten Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the general construction work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$623,240.00 on which he has received payment of \$552,364.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: [Handwritten Signature]

Subscribed and sworn to before me this 1st day of July, 2012.

Signature: [Handwritten Signature], Notary





FINAL WAIVER OF LIEN

STATE OF: SS
COUNTY OF:

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by The Dubs Company, Inc. to furnish plumbing for the premises known as DaVita Dialysis Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of twelve thousand five hundred eighty five dollars & no/100 (\$12,585.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 15 hand and seal this day of May, 2012. Signature and Seal

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: SS
COUNTY OF:

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is David Braid President of Alltech Plumbing who is the contractor for the plumbing work on the building located at 836 Dundee Avenue, Elgin IL 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$125,850.00 on which he has received payment of \$113,265.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

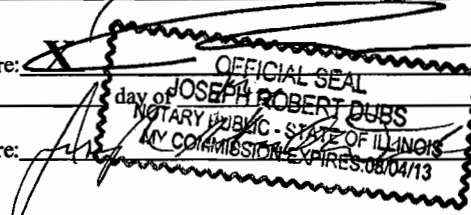
TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15 day of May, 2012.

Signature: [Signature] day of May, 2012.

Signature: [Signature] Notary



(seal)



STATE OF ILLINOIS  
 COUNTY OF Cook

**FINAL WAIVER OF LIEN**

Gty #

Escrow #

**TO WHOM IT MAY CONCERN:**

WHEREAS the undersigned has been employed by The Dubs Company to furnish HVAC for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of four thousand, nine hundred thirty dollars (\$4,930.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises, INCLUDING EXTRAS.\*

DATE 05/15/12 COMPANY NAME Classic Air Inc  
 ADDRESS 1576 Von Braun Trail, Elk Grove Village, IL 60007

SIGNATURE AND TITLE Debbie Hanks

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT

**CONTRACTOR'S AFFIDAVIT**

STATE OF ILLINOIS

COUNTY OF Cook

**TO WHOM IT MAY CONCERN:**

THE UNDERSIGNED, (NAME) Debbie Hanks BEING DULY SWORN, DEPOSES AND SAYS THAT HE OR SHE IS (POSITION) President OF (COMPANY NAME) Classic Air Inc WHO IS THE CONTRACTOR FURNISHING HVAC WORK ON THE BUILDING LOCATED AT 836 Dundee Avenue, Elgin, Illinois 60120 OWNED BY Total Renal Care, Inc.

That the total amount of the contract including extras\* is \$49,300.00 on which he or she has received payment of \$44,370.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names and addresses of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

NAMES AND ADDRESSES	WHAT FOR	CONTRACT PRICE INCLDG EXTRAS*	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Classic Air Inc	Mat & Labor	49,300.00	44,370.00	4,930.00	0
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS* TO COMPLETE.		49,300.00	44,370.00	4,930.00	0

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

DATE 5/15/12 SIGNATURE: Debbie Hanks

SUBSCRIBED AND SWORN TO BEFORE ME THIS 15 DAY OF May, 2012

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

g. hanks  
 NOTARY PUBLIC



FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by The Dubs Company to furnish electric for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of nine thousand two hundred twenty dollars & no cents (\$9,220.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 15 hand and seal this day of May, 2011. Signature and Seal [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Tim Benn President of The Right Approach who is the contractor for the electric work on the building located at 836 Dundee Avenue, Elgin, IL 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$92,200.00 on which he has received payment of \$82,980.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

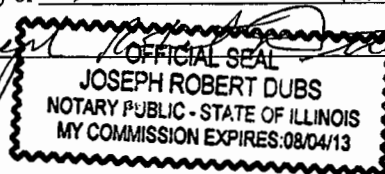
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15 day of May, 2011.

Signature: [Signature]

Subscribed and sworn to before me this 15 day of May, 2011.

Signature: [Signature], Notary



FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care, Inc. to furnish OH&P for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of two thousand, five hundred fifty seven dollars & no cents (\$2,557.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 15 hand day of May and seal this 2012.

Signature and Seal X

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the OH&P work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$25,570.00 on which he has received payment of \$23,013.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

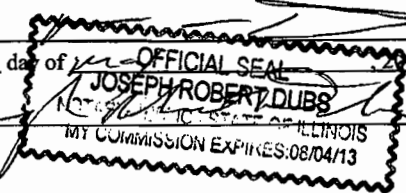
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15 day of May, 2012.

Signature: X

Subscribed and sworn to before me this 15 day of May, 2012.

Signature: Notary



(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care, Inc. to furnish General Conditions for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of eleven thousand, nine hundred thirty three dollars & no cents (\$11,933.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 15 hand day of May and seal this 2012.

Signature and Seal [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the General Conditions work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$59,665.00 on which he has received payment of \$47,732.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

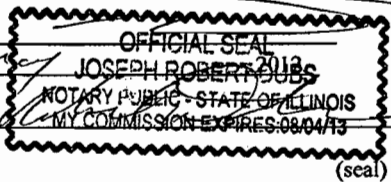
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15 day of May, 2012.

Signature: [Signature]

Subscribed and sworn to before me this 15 day of May

Signature: [Signature]



Notary

(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care, Inc. to furnish final clean for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of two hundred fifty dollars & no cents (\$250.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 15 hand day of May and seal this 2012.

Signature and Seal [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the final clean work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$2,500.00 on which he has received payment of \$2,250.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

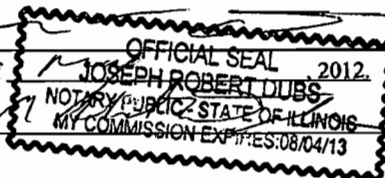
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15 day of May, 2012.

Subscribed and sworn to before me this 15 day of

Signature: [Signature]

Signature: [Signature]



Notary

(seal)

**FINAL WAIVER OF LIEN**

STATE OF ILLINOIS )  
COUNTY OF DeKalb )

ESCROW# \_\_\_\_\_ FILE# \_\_\_\_\_

WHEREAS THE UNDERSIGNED HAS BEEN EMPLOYED BY THE DUBS COMPANY, TO

FURNISH BRACKETS FOR

THE PREMISES KNOWN AS 836 Dundee Road, Elgin, IL 60120P

WHICH DAVITA IS THE OWNER.

THE UNDERSIGNED, FOR AND IN CONSIDERATION OF TWO THOUSAND THREE HUNDRED SEVENTY-ONE & 00/100 (\$2,371.00) DOLLARS, AND OTHER GOOD AND VALUABLE CONSIDERATIONS, THE RECEIPT WHEREOF IS HEREBY ACKNOWLEDGED, DO(ES) HEREBY WAIVE AND RELEASE ANY AND ALL LIEN OR CLAIM OF, OR RIGHT TO, LIEN, UNDER THE STATUTES OF THE STATE OF ILLINOIS, RELATING TO MECHANICS' LIENS, WITH RESPECT TO AND ON SAID ABOVE-DESCRIBED PREMISES, AND THE IMPROVEMENTS THEREON, AND ON THE MATERIAL, FIXTURES, APPARATUS OR MACHINERY FURNISHED, AND ON THE MONEYS, FUNDS OR OTHER CONSIDERATIONS DUE OR TO BECOME DUE FROM THE OWNER, ON ACCOUNT OF LABOR SERVICES, MATERIAL, FIXTURES, APPARATUS OR MACHINERY FURNISHED AT ANY TIME HEREAFTER BY THE UNDERSIGNED FOR THE ABOVE-DESCRIBED PREMISES.

DATED 5/11/13 COMPANY NAME NU-MILL, INC.

SIGN HERE

SIGNATURE AND TITLE

Sandra A. Garber / Sec. Tre.

**IF YOU HAVE CONTRACTED FOR LABOR OR MATERIALS ON THIS JOB YOU MUST COMPLETE THE CONTRACTOR'S AFFIDAVIT**

STATE OF ILLINOIS )  
COUNTY OF DeKalb ) SS

**CONTRACTOR'S AFFIDAVIT**

TO WHOM IT MAY CONCERN:

THE UNDERSIGNED, BEING DULY SWORN, DEPOSES AND SAYS THAT HE IS SUBCONTRACTOR/SUPPLIER OF THE SUBCONTRACTOR/GENERAL CONTRACTOR WHO IS THE CONTRACTOR FOR THE BRACKETS WORK ON THE BUILDING LOCATED AT 836 Dundee Rd, Elgin, IL, OWNED BY DAVITA. THAT THE TOTAL AMOUNT OF THE CONTRACT INCLUDING EXTRAS\* IS \$2,371.00 ON WHICH HE OR SHE HAS RECEIVED PAYMENT OF \$0.00 PRIOR TO THIS PAYMENT. THAT ALL WAIVERS ARE TRUE, CORRECT AND GENUINE AND DELIVERED UNCONDITIONALLY AND THAT THERE IS NO CLAIM EITHER LEGAL OR EQUITABLE TO DEFEAT THE VALIDITY OF SAID WAIVERS. THAT THE FOLLOWING ARE THE NAMES AND OF ALL PARTIES WHO HAVE FURNISHED MATERIAL OR LABOR, OR BOTH, FOR SAID WORK AND ALL PARTIES HAVING CONTRACTS OR SUB CONTRACTS FOR SPECIFIC PORTIONS OF SAID WORK OR FOR MATERIAL ENTERING INTO THE CONSTRUCTION THEREOF AND THE AMOUNT DUE OR TO BECOME DUE TO EACH, AND THAT THE ITEMS MENTIONED INCLUDE ALL LABOR AND MATERIAL REQUIRED TO COMPLETE SAID WORK ACCORDING TO PLANS AND SPECIFICATIONS:

NAMES	WHAT FOR	CONTRACT PRICE INCLUDING EXTRAS*	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
NU-MILL	ALL MATERIAL FROM FULLY PAID STOCK	\$2,371.00	\$0.00	\$2,371.00	0.00
TOTAL LABOR & MATERIAL INCLUDING EXTRAS* TO COMPLETE		\$2,371.00	\$0.00	\$2,371.00	\$0.00

THAT THERE ARE NO OTHER CONTRACTS FOR SAID WORK OUTSTANDING, AND THAT THERE IS NOTHING DUE OR TO BECOME DUE TO ANY PERSON FOR MATERIAL, LABOR OR OTHER WORK OF ANY KIND DONE OR TO BE DONE UPON OR IN CONNECTION WITH SAID WORK OTHER THAN ABOVE STATED.

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_

OFFICIAL SEAL  
20  
JOSEPH ROBERT DUBS  
NOTARY PUBLIC, STATE OF ILLINOIS  
MY COMMISSION EXPIRES: 08/04/13

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

**FINAL WAIVER OF LIEN**

STATE OF ILLINOIS

QTY.# \_\_\_\_\_

COUNTY OF Saline ) SS

ESCROW.# \_\_\_\_\_

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by THE DUBS COMPANY  
to furnish Custom Plastic Laminate Casework  
for the premises known as Davita Cobblestone Dialysis  
of which \_\_\_\_\_ is the owner.

THE undersigned, for and in consideration of Three Thousand Eight Hundred Fifty One and 00/100  
(\$ 3,851.00)

Dollars, and other good and valuable consideration, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor services, material, fixtures, apparatus or machinery heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises, INCLUDING EXTRAS\*.

DATE 05/10/12 COMPANY NAME Wilson Kitchens, Inc.

ADDRESS 1633 S. Feazel Street, Harrisburg, IL 62946

SIGNATURE AND TITLE *Harold Wilson* President

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

**CONTRACTOR'S AFFIDAVIT**

STATE OF ILLINOIS

COUNTY OF Saline

TO WHOM IT MAY CONCERN:

THE UNDERSIGNED, (NAME) Harold Wilson BEING DULY SWORN,

DEPOSES AND SAYS THAT HE OR SHE IS (POSITION) President OF (COMPANY NAME)

Wilson Kitchens, Inc. WHO IS THE CONTRACTOR FURNISHING

Custom Casework WORK ON THE BUILDING LOCATED AT

836 Dundee Avenue, Elgin, IL 60120 OWNED BY \_\_\_\_\_

That the total amount of the contract including extras\* is \$ 38,510.00 on which he or she has received payment of \$ 34,659.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defect the validity of said waivers. That the following are the names and addresses of all parties who have furnished material or labor, or both, for said work and all parties having contracts or subcontracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material received to complete said work according to plans and specifications:

NAME AND ADDRESSES	WHAT FOR	CONTRACT PRICE INCLUDING EXTRAS*	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
WK1	Casework	38,510.00	34,659.00	3,851.00	0.00
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS* TO COMPLETE		38,510.00	34,659.00	3,851.00	0.00

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

DATE 5/10/12 SIGNATURE *Harold Wilson*

SUBSCRIBED AND SWORN TO BEFORE ME THIS 10th DAY OF May, 2012

*Darla G. Martin*  
NOTARY PUBLIC  
Darla G. Martin  
Notary Public, State of Illinois  
My Commission Expires 8/29/2012

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.



FINAL WAIVER OF LIEN

STATE OF WISCONSIN

Gty# \_\_\_\_\_

COUNTY OF KENOSHA

Loan # \_\_\_\_\_

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Dubs Company to furnish Doors, Frames, & Hardware for the premises known as DaVita Coblestone Tenant Build Out of which Total Renal Care is the owner.

THE undersigned, for and in consideration of One thousand seven hundred forty seven dollars and no cents \$1,747.00 Dollars, and other good and valuable considerations, the receipt of whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the materials, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of labor services, material, fixtures, apparatus or machinery heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under my hand and seal this 17th day of May, 2012.

Signature and Seal: [Handwritten Signature]

CONTRACTOR'S AFFIDAVIT

STATE OF WISCONSIN

COUNTY OF KENOSHA

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he is Thomas A. Frost Corporate Secretary of Bane Nelson, Inc. who is the contractor for the Doors, Frames, & Hardware work on the building located at 836 Dundee Ave, Elgin, IL 60120 owned by Total Renal Care

That the total amount of the contract including extras is \$17,465.00 on which he has received payment of \$15,718.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or subcontracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications.

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE. Row 1: Bane Nelson Inc, Material, \$17,465.00, \$15,718.00, \$1,747.00, \$0.00. Row 2: All material is taken from fully paid stock and is delivered in our own trucks. Row 3: TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15th day of May, 2012.

Signature: [Handwritten Signature]

Subscribed and sworn to before me this 15th day of May, 2012.

[Notary Seal: JENNIFER LIMBACH, NOTARY PUBLIC, STATE OF WISCONSIN]



STATE OF ILLINOIS  
COUNTY OF KANE

**FINAL WAIVER OF LIEN**

Gty #

Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by THE DUBS COMPANY to furnish AUTOMATIC DOOR EQUIPMENT for the premises known as COBBLESTONE DIALYSIS of which TOTAL RENAL CARE, INC. is the owner.

THE undersigned, for and in consideration of FIVE THOUSAND TWO HUNDRED SEVENTY AND 00/100 (\$5,270.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises, INCLUDING EXTRAS.\*

DATE 05/14/2012 COMPANY NAME TEE JAY SERVICE COMPANY  
ADDRESS PO BOX 369, BATAVIA, IL 60510

SIGNATURE AND TITLE

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT

**CONTRACTOR'S AFFIDAVIT**

STATE OF ILLINOIS

COUNTY OF KANE

TO WHOM IT MAY CONCERN:

THE UNDERSIGNED, (NAME) BRIAN H. SMITH BEING DULY SWORN, DEPOSES AND SAYS THAT HE OR SHE IS (POSITION) PRESIDENT OF (COMPANY NAME) TEE JAY SERVICE COMPANY WHO IS THE CONTRACTOR FURNISHING AUTOMATIC DOOR EQUIPMENT WORK ON THE BUILDING LOCATED AT 836 DUNDEE AVENUE, ELGIN, IL 60120 OWNED BY TOTAL RENAL CARE, INC.

That the total amount of the contract including extras\* is \$5,270.00 on which he or she has received payment of \$0.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names and addresses of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

NAMES AND ADDRESSES	WHAT FOR	CONTRACT PRICE INCLDNG EXTRAS*	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
All material taken from fully paid stock and delivered to jobsite in company owned vehicles.	Automatic door equipment	\$5,270.00	\$0.00	\$5,270.00	\$0.00
All labor paid in full. No outside rental equipment used.					
Principal Supplier: Horton Automatics 4242 Baldwin Boulevard, Corpus Christi, TX					
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS* TO COMPLETE.		\$5,270.00	\$0.00	\$5,270.00	\$0.00

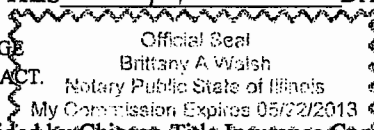
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

DATE 5/14/2012

SIGNATURE:

SUBSCRIBED AND SWORN TO BEFORE ME THIS 14th DAY OF May, 2012

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.



NOTARY PUBLIC

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care, Inc. to furnish auto door for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of five hundred twenty seven dollars & no cents (\$527.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 15 hand and seal this day of May, 2012.

Signature and Seal X

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the auto door work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$5,270.00 on which he has received payment of \$4,743.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

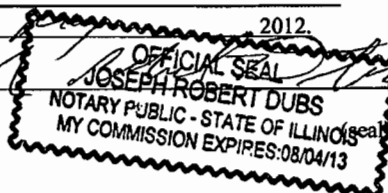
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15 day of May, 2012.

Signature: X

Subscribed and sworn to before me this 15 day of May, 2012.

Signature: Notary





STATE OF ILLINOIS }  
 COUNTY OF DeKalb } SS

**FINAL WAIVER OF LIEN**

Gty # \_\_\_\_\_

Escrow # \_\_\_\_\_

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by The Dubs Co.  
 to furnish Aluminum Entrances, Windows and Glass & Glazing  
 for the premises known as Cobblestone Dialysis Clinic  
 of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of Six Thousand Sixty-Nine Dollars and no/100  
 (\$ 6,069.00 ) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statute of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises, INCLUDING EXTRAS.\*

DATE 5-7-12 COMPANY NAME DeKalb Contract Glazing, Inc.  
 ADDRESS 207 N. 6<sup>th</sup> St., DeKalb, Illinois, 60115

SIGNATURE AND TITLE [Signature] Chris Filicetti General Manager

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

**CONTRACTOR'S AFFIDAVIT**

STATE OF ILLINOIS }  
 COUNTY OF DeKalb } SS

TO WHOM IT MAY CONCERN:

THE UNDERSIGNED, (NAME) Chris Filicetti BEING DULY SWORN, DEPOSES  
 AND SAYS THAT HE OR SHE IS (POSITION) General Manager OF  
 (COMPANY NAME) DeKalb Contract Glazing, Inc. WHO IS THE  
 CONTRACTOR FURNISHING Aluminum Entrances, Windows and Glass & Glazing WORK ON THE BUILDING  
 LOCATED AT 836 Dundee Ave., Elgin, IL 60120  
 OWNED BY Total Renal Care

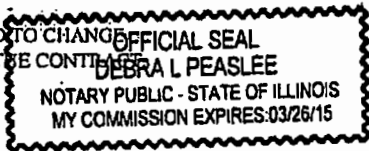
That the total amount of the contract including extras\* is \$ 39,255.00 on which he or she has received payment of \$ 33,186.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names and addresses of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

NAMES AND ADDRESSES	WHAT FOR	CONTRACT PRICE INCLDG EXTRAS*	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Kawneer	Doors & Framing	12,778.00	12,778.00		0.00
Custom Glass Products	Glass	4,232.00	3,489.00	743.00	0.00
DeKalb Contract Glazing	Labor	22,245.00	16,919.00	5,326.00	0.00
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS*		39,255.00	33,186.00	6,069.00	0.00

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

DATE 5-7-12 SIGNATURE: [Signature]  
 SUBSCRIBED AND SWORN TO BEFORE ME THIS 7 DAY OF May, 2012,

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.



[Signature]  
 NOTARY PUBLIC

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by The Dubs Company, Inc. to furnish carpentry for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of eleven thousand, four hundred eighty five dollars & no cents (\$11,485.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under hand and seal this day of , 2012.

Signature and Seal X [Handwritten Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF:
COUNTY OF:

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Rob Ferguson President of IBEK Construction who is the contractor for the carpentry work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$114,846.00 on which he has received payment of \$103,361.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15th day of May, 2012.

Signature: X [Handwritten Signature]

Subscribed and sworn to before me this 15 day of

Signature:



Notary

(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by The Dubs Company, Inc. to furnish flooring for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of one thousand, five hundred fifty five dollars & no cents (\$1,555.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under hand and seal this day of 2012

Signature and Seal [Handwritten Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: SS
COUNTY OF:

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Michael Ferguson President of T & M Commercial Flooring who is the contractor for the flooring work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$15,546.00 on which he has received payment of \$13,991.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

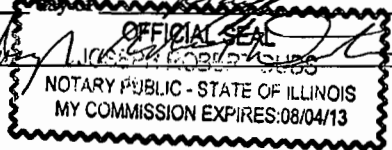
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this day of 2012

Signature: [Handwritten Signature]

Subscribed and sworn to before me this day of 2012

Signature: [Handwritten Signature] Notary



(seal)

FINAL WAIVER OF LIEN

STATE OF: SS
COUNTY OF:

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by The Dubs Company, Inc. to furnish epoxy flooring for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of four hundred ninety five dollars & no cents (\$495.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 15th day of May and seal ed 2012 this
Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: SS
COUNTY OF:

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is of who is the contractor for the epoxy flooring work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$4,950.00 on which he has received payment of \$4,455.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

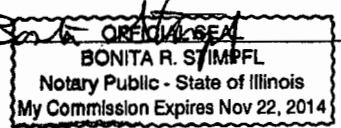
TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15th day of May, 2012.

Subscribed and sworn to before me this 15th day of May, 2012.

Signature: [Signature] Notary



(seal)



STATE OF ILLINOIS

COUNTY OF Cook

**FINAL WAIVER OF LIEN**

Gty #

Escrow #

**TO WHOM IT MAY CONCERN:**

WHEREAS the undersigned has been employed by The Dubs Company to furnish painting work for the premises known as Davita Cobblestone of which Total Renal Care is the owner.

THE undersigned, for and in consideration of one thousand sixty two dollars (\$1,062.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises, INCLUDING EXTRAS.\*

DATE 5/10/12 COMPANY NAME Capitol Decorating  
ADDRESS 1352 Ridge Avenue Elk Grove, IL 60007

SIGNATURE AND TITLE \_\_\_\_\_

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT

**CONTRACTOR'S AFFIDAVIT**

STATE OF ILLINOIS

COUNTY OF Cookj

**TO WHOM IT MAY CONCERN:**

THE UNDERSIGNED, (NAME) Gerhard Becker BEING DULY SWORN, DEPOSES AND SAYS THAT HE OR SHE IS (POSITION) a Vice-President OF (COMPANY NAME) Capitol Decorating WHO IS THE CONTRACTOR FURNISHING painting WORK ON THE BUILDING LOCATED AT 836 Dundee Avenue Elgin IL 60120 OWNED BY Total Renal Care

That the total amount of the contract including extras\* is \$10,615.00 on which he or she has received payment of \$9,553.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names and addresses of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

NAMES AND ADDRESSES	WHAT FOR	CONTRACT PRICE INCLDNG EXTRAS*	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Material taken from fully paid stock and delivered to job site via company owned vehicles.					
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS* TO COMPLETE.					

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

DATE 5/10/12

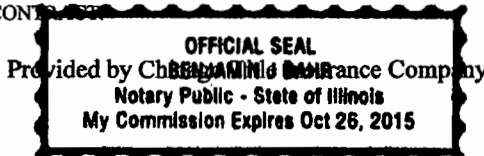
SIGNATURE: \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME THIS 10th DAY OF May, 2012

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT

Bon J. Burr  
NOTARY PUBLIC

F.3870 R5/96





FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care, Inc. to furnish FRP for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of six hundred ten dollars & no cents (\$610.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 15 hand day of May and seal this 2012.

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the FRP work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$6,100.00 on which he has received payment of \$5,490.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

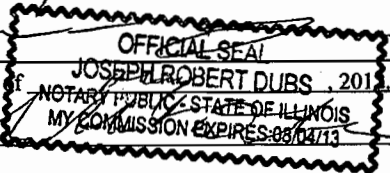
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15 day of May, 2012.

Signature: X [Signature]

Subscribed and sworn to before me this 15 day of May

Signature: [Signature]



Notary

(seal)

STATE OF ILLINOIS

**FINAL WAIVER OF LIEN**

Gty # \_\_\_\_\_

SS

COUNTY OF LAKE

Loan # \_\_\_\_\_

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by The Dubs Company

to furnish and Install Metal Lockers

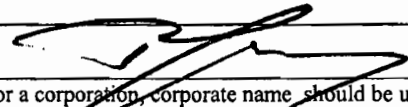
for the premises known as DaVita Coblbe Stone

of which Total Renal Care is the owner.

The undersigned, for and in consideration of One Hundred Ninety Three &00/100 (\$193.00) Dollars, and other good and valuable consideration, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other consideration, due or to become due from the owner, on account of labor, services, material, fixtures, apparatus or machinery heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under My hand and seal \_\_\_\_\_ this

7th day of May 2012.

Signature and Seal: 

NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself partner.

STATE OF ILLINOIS

**CONTRACTOR'S AFFIDAVIT**

SS

COUNTY OF LAKE

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he is Richard A Haynes

President of the Interior Steel Products Co

who is the contractor for the Furnish and Install Metal Lockers work on the

building located at 826 Dundee St, Elgin IL 60120

owned by Total Renal Care

That the total amount of the contract including extras is \$ 1930.00 on which he has received payment of \$ 1,737.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

NAMES	WHAT FOR	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
All Material	Metal Lockers	1,930.00	1,737.00	193.00	-0-
From Fully Paid Stock					
Delivered in Our Trucks					
All Labor Paid in full					
<b>TOTAL LABOR AND MATERIAL TO COMPLETE</b>		1,930.00	1,737.00	193.00	-0-

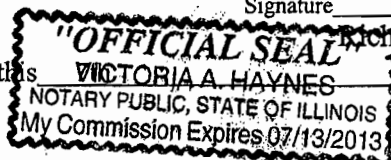
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed 7th day of May 2012.

Signature 

Richard A Haynes

Subscribed and sworn to before me this 7th day of May 2012



*Victoria A Haynes*



STATE OF ILLINOIS  
 COUNTY OF COOK

**FINAL WAIVER OF LIEN**

Gty #

Escrow #

**TO WHOM IT MAY CONCERN:**

WHEREAS the undersigned has been employed by The Dubs Company to furnish Toilet Partitions/Accessories/Fire Ext. Cabinets/Lockers Work for the premises known as Cobblestone Dialysis of which Total Renal Care is the owner.

THE undersigned, for and in consideration of Two Thousand Nine Hundred Ninety Four Dollars & 00/100--- (\$2,994.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises, INCLUDING EXTRAS.\*

DATE 05/08/12 COMPANY NAME Commercial Specialties, Inc.  
 ADDRESS 2255 Lois Drive #9, Rolling Meadows, IL. 60008

SIGNATURE AND TITLE

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT

**CONTRACTOR'S AFFIDAVIT**

STATE OF ILLINOIS

COUNTY OF Cook

**TO WHOM IT MAY CONCERN:**

THE UNDERSIGNED, (NAME) Larry Cirincione BEING DULY SWORN, DEPOSES AND SAYS THAT HE OR SHE IS (POSITION) President OF (COMPANY NAME) Commercial Specialties, Inc. WHO IS THE CONTRACTOR FURNISHING Toilet Partitions/Accessories/Fire Ext Cabinets/Lockers WORK ON THE BUILDING LOCATED AT 836 Dundee Avenue Elgin, Illinois OWNED BY Total Renal Care

That the total amount of the contract including extras\* is \$2,994.00 on which he or she has received payment of \$0.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names and addresses of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

NAMES AND ADDRESSES	WHAT FOR	CONTRACT PRICE INCLDg EXTRAS*	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Commercial Specialties, Inc.	Toilet Partitions	\$2,994.00	0.00	\$2,994.00	0.00
2255 Lois Dr. #9. Rolling Meadows, IL 60008	Toilet Accessories				
All material taken from fully paid stock	Fire Ext Cabinets				
	Lockers				
All labor & benefits paid in full.					
Deivered in company vehicle No outside rental					
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS* TO COMPLETE.		\$2,994.00	0.00	\$2,994.00	0.00

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

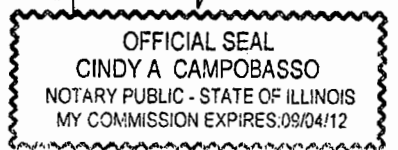
DATE 5-8-12

SIGNATURE:

SUBSCRIBED AND SWORN TO BEFORE ME THIS 8 DAY OF May 2012

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

NOTARY PUBLIC





STATE OF ILLINOIS  
COUNTY OF COOK

**FINAL WAIVER OF LIEN**

Gty #

Escrow #

**TO WHOM IT MAY CONCERN:**

WHEREAS the undersigned has been employed by The Dubs Company, Inc. to furnish Manual Roller Shades for the premises known as Cobblestone Dialysis, 836 Dundee Ave., Elgin, IL 60120 of which Total Renal Care, Inc., 601 Hawaii St., Elsegundo, CA 90245 is the owner.

THE undersigned, for and in consideration of Four Thousand Two Hundred Thirty Three and 00/xx (\$4,233.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises, INCLUDING EXTRAS.\*

DATE 5/14/2012 COMPANY NAME ALLSTAR DRAPERY & WINDOW TREATMENT CO.

ADDRESS 453 PARKVIEW TERRACE, BUFFALO GROVE, IL 60089

SIGNATURE AND TITLE Dennis Kipnis, President

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT

**CONTRACTOR'S AFFIDAVIT**

STATE OF ILLINOIS

COUNTY OF COOK

**TO WHOM IT MAY CONCERN:**

THE UNDERSIGNED, (NAME) DENNIS KIPNIS BEING DULY SWORN, DEPOSES AND SAYS THAT HE OR SHE IS (POSITION) PRESIDENT OF (COMPANY NAME) ALLSTAR DRAPERY & WINDOW TREATMENT CO. WHO IS THE CONTRACTOR FURNISHING MANUAL ROLLER SHADES WORK ON THE BUILDING LOCATED AT COBBLESTONE DIALYSIS, 836 DUNDEE AVE., ELGIN, IL 60120 OWNED BY TOTAL RENAL CARE, INC., 601 HAWAII ST., ELSEGUNDO, CA 90245

That the total amount of the contract including extras\* is \$4,233.00 on which he or she has received payment of \$0.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names and addresses of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

NAMES AND ADDRESSES	WHAT FOR	CONTRACT PRICE INCLDG EXTRAS*	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
ALLSTAR DRAPERY (DRAPER) 453 PARKVIEW TERRACE BUFFALO GROVE, IL 60089	MANUAL ROLLER SHADES	\$4,233.00	\$0.00	\$4,233.00	\$0.00
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS* TO COMPLETE.		\$4,233.00	\$0.00	\$4,233.00	\$0.00

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

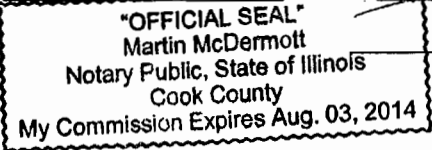
DATE 5/14/2012

SIGNATURE: Dennis Kipnis, President

SUBSCRIBED AND SWORN TO BEFORE ME THIS

14th DAY OF May, 2012

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.



NOTARY PUBLIC

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care, Inc. to furnish Change Order 1 for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of two thousand, seventy six dollars & no cents (\$2,076.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 15 hand and seal this day of May, 2012.

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order 1 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$20,766.00 on which he has received payment of \$18,690.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

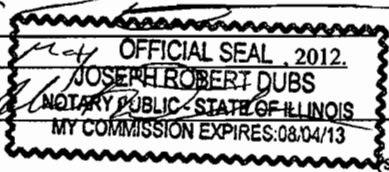
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15 day of May, 2012.

Signature: X [Signature]

Subscribed and sworn to before me this 15 day of May, 2012.

Signature: [Signature] Notary



FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care, Inc. to furnish Change Order 2 for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of twenty nine dollars & no cents (\$29.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 15 hand day of May and seal this 2012.

Signature and Seal [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order 2 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$289.00 on which he has received payment of \$260.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

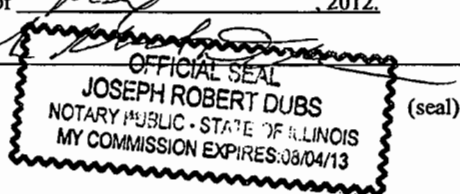
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15 day of May, 2012.

Signature: [Signature]

Subscribed and sworn to before me this 15 day of May, 2012.

Signature: [Signature] Notary



FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care, Inc. to furnish Change Order 3 for the premises known as DaVita Cobblestone of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of five hundred sixty one dollars & no cents (\$561.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 15 hand day of May and seal this 2012.

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order 3 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$5,607.00 on which he has received payment of \$5,046.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

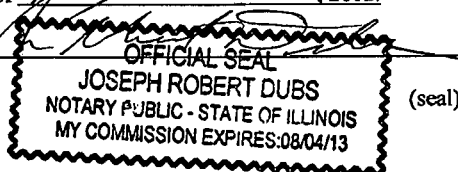
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 15 day of May, 2012.

Signature: X [Signature]

Subscribed and sworn to before me this 15 day of May, 2012.

Signature: [Signature], Notary



FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #4 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of one hundred fifty eight dollars & no cents (\$158.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July, 2012, and seal this

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #4 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$1,575.00 on which he has received payment of \$1,417.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: X [Signature]

Subscribed and sworn to before me this 1st day of July, 2012.

Signature: [Signature] JOSEPH ROBERT DUBS, NOTARY PUBLIC - STATE OF ILLINOIS, MY COMMISSION EXPIRES: 08/04/13, Notary (seal)



FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #5 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of thirty eight dollars & no cents (\$38.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July, 2012, and seal this

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #5 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$380.00 on which he has received payment of \$342.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

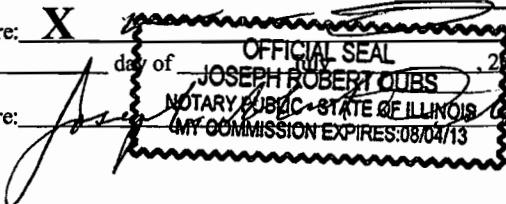
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: X [Signature]

Subscribed and sworn to before me this 1st day of July, 2012.

Signature: [Signature] Notary



(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #6 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of one hundred ninety one dollars & no cents (\$191.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July, 2012, and seal this

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #6 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$1,911.00 on which he has received payment of \$1,720.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: X [Signature]
Subscribed and sworn to before me this 1st day of July, 2012.
Signature: [Signature] Notary



(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #7 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of eighteen dollars & no cents (\$18.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July and seal this 2012.

Signature and Seal X

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #7 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$178.00 on which he has received payment of \$160.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

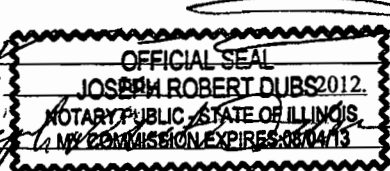
TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: X
Signature: Notary Public, State of Illinois, My Commission Expires 06/04/13

Subscribed and sworn to before me this 1st day of July, 2012.



(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #8 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of forty four dollars & no cents (\$44.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July 2012 and seal this

Signature and Seal X

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #8 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$441.00 on which he has received payment of \$397.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

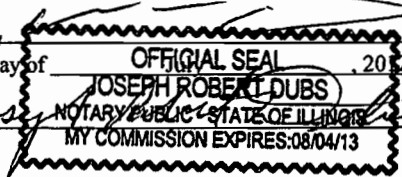
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: X

Subscribed and sworn to before me this 1st day of July, 2012.

Signature: Notary



(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #9 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of two hundred twenty eight dollars & no cents (\$228.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under hand and seal this 1st day of July, 2012.

Signature and Seal [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #9 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$2,276.00 on which he has received payment of \$2,048.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE. The table is currently empty.

TOTAL LABOR AND MATERIAL TO COMPLETE

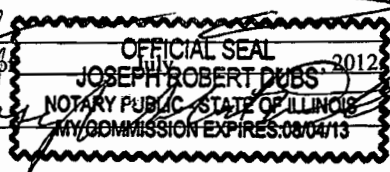
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: [Signature]

Subscribed and sworn to before me this 1st day of July, 2012.

Signature: [Signature] Notary



(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #10 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of sixty eight dollars & no cents (\$68.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July, 2012, and seal this

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #10 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$681.00 on which he has received payment of \$613.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

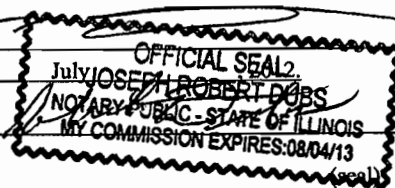
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: X [Signature]

Subscribed and sworn to before me this 1st day of July, 2012.

Signature: [Signature] Notary



FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #11 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of sixty two dollars & no cents (\$62.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st day of July, 2012, and seal this Signature and Seal X

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #11 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$615.00 on which he has received payment of \$553.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

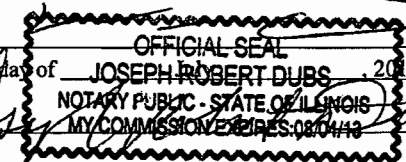
Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: X
Subscribed and sworn to before me this 1st day of July, 2012.
Signature: JOSEPH ROBERT DUBS, Notary



(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #12 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of ninety dollars & no cents (\$90.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July and seal this 2012.

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #12 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$899.00 on which he has received payment of \$809.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE. The table is currently empty.

TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: X [Signature]
Signature: [Signature]
OFFICIAL SEAL
JOSEPH ROBERT DUBS
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES 08/04/13
Notary (seal)

Subscribed and sworn to before me this 1st day of July, 2012.



FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #13 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of seven dollars & no cents (\$7.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July, 2012, and seal this

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #13 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$65.00 on which he has received payment of \$58.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

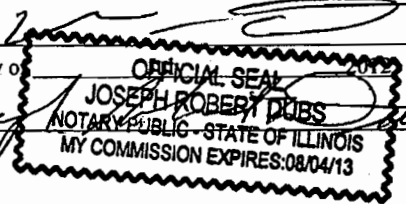
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: X [Signature]

Subscribed and sworn to before me this 1st day of July, 2012.

Signature: [Signature] Notary



(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #14 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of (twenty three dollars & no cents) (\$23.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July, 2012, and seal this

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #14 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is (233.00) on which he has received payment of (\$210.00) prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

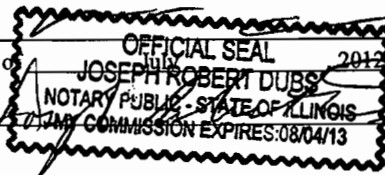
TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Subscribed and sworn to before me this 1st day of July, 2012.

Signature: X [Signature]
Signature: [Signature] Notary



(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #15 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of (one thousand, one hundred twenty dollars & no cents) (\$1,120.00) Dollars, and other good and valuable considerations, the receipt whereof if hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July, 2012 and seal this

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #15 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is (\$11,200.00) on which he has received payment of (\$10,080.00) prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE

TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012

Signature: X [Signature]

Subscribed and sworn to before me this 1st

day of July, 2012
Signature: [Signature] Notary

(seal)

FINAL WAIVER OF LIEN

STATE OF: Illinois
COUNTY OF: Cook

Gty #
Escrow #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Total Renal Care to furnish Change Order #16 for the premises known as DaVita Cobblestone Dialysis of which Total Renal Care, Inc. is the owner.

THE undersigned, for and in consideration of seventy one dollars & no cents (\$71.00) Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the statutes of the State of Illinois, relating to mechanics' liens, with respect to and on said above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys, funds or other considerations due or to become due from the owner, on account of all labor, services, material, fixtures, apparatus or machinery, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 1st hand day of July and seal this 2012.

Signature and Seal X [Signature]

\*NOTE: All waivers must be for the full amount paid. If waiver is for a corporation, corporate name should be used, corporate seal affixed and title of officer signing waiver should be set forth; if waiver is for a partnership, the partnership name should be used, partner should sign and designate himself as partner.

CONTRACTOR'S AFFIDAVIT

STATE OF: Illinois
COUNTY OF: Cook

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he/she is Robin M. Dubs President of The Dubs Company who is the contractor for the Change Order #16 work on the building located at 836 Dundee Avenue, Elgin, Illinois 60120 owned by Total Renal Care, Inc.

That the total amount of the contract including extras is \$714.00 on which he has received payment of \$643.00 prior to this payment. That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names of all parties who have furnished material or labor, or both, for said work and all parties having contracts or sub contracts for specific portions of said work or for material entering into the construction thereof and the amount due or to become due to each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications:

Table with 6 columns: NAMES, WHAT FOR, CONTRACT PRICE, AMOUNT PAID, THIS PAYMENT, BALANCE DUE. The table is currently empty.

TOTAL LABOR AND MATERIAL TO COMPLETE

That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 1st day of July, 2012.

Signature: X [Signature]

Subscribed and sworn to before me this 1st day of July, 2012.

Signature: [Signature] Notary

