



Hospital Administration

1740 W. Taylor Street  
Suite 1400, MC 693  
Chicago, Illinois 60612  
P 312-996-3900  
F 312-996-7049



September 13, 2017

**RECEIVED**

SEP 14 2017

**HEALTH FACILITIES &  
SERVICES REVIEW BOARD**

Ms. Courtney Avery, Administrator  
Health Facilities and Services Review Board  
525 West Jefferson Street, 2nd Floor  
Springfield, Illinois 62761

Re: UIMCC Modernization Project CON Permit #10-073 Final Cost Report

In developing the data to submit in our final realized cost report per Section 1130.770, we determined that the Project would have a cost overrun in excess the allowable outlined in the Rules. This was due primarily to interest expense on the financing of the Project. We previously notified and met with the Review Board Administrator and the Board's Legal Counsel regarding this situation and have been discussing possible resolutions and settlement with them since that time. In furtherance thereof, Mr. Juan Morado Jr. and Ms. Jeannie Mitchell were advised, and agreed, that we should proceed with submitting the final cost report to the Health Facilities and Services Review Board based on the detailed costs as provided in the attached independent audit, notwithstanding that the resolutions and settlement continue to be addressed.

Please let me know if you have any questions, comments and/or suggestions.

Sincerely,

David H. Loffing  
Chief Operating Officer

cc: Mike Constantino, Supervisor, Project Review Section, HFSRB ✓  
Juan Morado Jr. General Counsel and Ethics Officer, HFSRB  
Douglas Swill, Drinker, Biddle & Reath LLP  
Janet Scheuerman, PRISM Healthcare Consulting  
Ed Parkhurst, PRISM Healthcare Consulting  
Cynthia Alcantara, UIC Legal Counsel



Hospital Administration

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September 13, 2017

Mr. Mike Constantino  
Illinois Health Facilities and Services Review Board  
525 W. Jefferson Street – 2<sup>nd</sup> Floor  
Springfield, Illinois 627761

Re: Project Completion  
University of Illinois Medical Center at Chicago (UIMCC)  
Modernization Project  
CON #10-073

Dear Mr. Constantino,

In accordance with 77 Ill. Administrative Code Section 1130.770, Project completion, Final Cost Realized and Cost Overruns, UIMCC is providing you with the following information regarding our Modernization Project Certificate of Need # 10-073. All data represented is final information for the project.

1. Itemization of all project costs; (per independent external audit, Attachment 4)

	<u>Project Cost</u>			
	<u>Approved Permit Amount</u>	<u>Final Approved Alteration</u>	<u>Actual Funds Expended</u>	<u>Variance</u>
Costs:				
Preplanning costs	\$ 280,000	\$ 280,000	\$ 129,288	\$ 150,702
Modernization contracts	24,000,000	22,980,000	25,728,682	(2,748,682)
Contingencies	2,776,195	2,776,195	2,858,742	(82,547)
Architectural/engineering fees	1,954,000	1,954,000	3,429,847	(1,475,847)
Consulting and other fees	558,240	558,240	468,293	89,947
Movable or other equipment	6,000,000	6,000,000	3,495,024	2,504,976
Bond issuance expense	800,000	800,000	374,905	425,095
Net interest expense during construction (project related)	2,818,125	2,818,125	7,683,659	(4,865,534)
Other costs to be capitalized	746,463	746,463	1,762,667	(1,016,204)
Total project cost	<u>\$ 39,933,023</u>	<u>\$ 38,913,023</u>	<u>\$ 45,930,917</u>	<u>\$ (7,017,894)</u>
	<u>Sources of Funds</u>			
	<u>Approved CON Amount</u>	<u>Final Approved Alteration</u>	<u>Actual Funds Spent</u>	<u>Variance</u>
Cash and securities	\$ -	\$ -	\$ -	\$ -
Pledges	-	-	-	-
Gifts and bequests	-	-	-	-
Bond issues (project related)	39,933,023	39,933,023	45,930,917	(5,997,894)
Mortgages/loans	-	-	-	-
Leases (fair market value)	-	-	-	-
government appropriations	-	-	-	-
Grants	-	-	-	-
Other funds and sources	-	-	-	-
Total funds	<u>\$ 39,933,023</u>	<u>\$ 39,933,023</u>	<u>\$ 45,930,917</u>	<u>\$ (5,997,894)</u>

*The project is 100% complete and the final project cost is \$45,930,917, which is \$7,017,894 above the total project cost of the permit as altered October 27, 2016 (attachment 1).*

2. Itemization of those project cost that have been or will be submitted for reimbursement under Title XVIII and XIX;

*All the cost detailed in the table under in item 1 of this letter has been submitted for reimbursement under Title XVIII and XIX.*

3. Certification that the final realized cost are the total costs required to complete the project and that there are no additional cost or capital expenditures related to the project that will be submitted for reimbursement under Title XVIII or XIX.

*I hereby certify that the final realized costs are the total costs required to complete the project and that there are no additional costs or capital expenditures related to the project, that will be submitted for reimbursement under Title XVIII or XIX.*

4. Certification of compliance with all terms of the permit to date, including project costs, square footage, services, etc.; certification attesting to compliance with the requirements of this Section must be in the form of a notarized statement signed by an authorize representative the permit holder;

*I hereby certify that these are the final total realized costs required to complete the project and there are no additional or associated costs or capital expenditures related to the project that will be submitted. The project was constructed in accordance with the requirement of the altered and final permit, square-footage and services.*

5. The final application and certificate for payment for the construction contract, as per the American Institute of Architects from G702 or equivalent; and

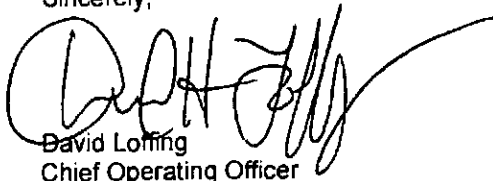
*See attachment Number 2 for equivalent certificate of payments and Waivers of Lien in accordance with the University of Illinois and State Procurement Rules and Regulations. This project was finalized as reflected in the attached documents (Attachment 2).*

6. For permits with a project cost equal to or greater than three times the capital expenditure minimum in place at the time of permit approval, and audited financial report of all projects cost and sources of funds.

*The audit of the project financials is attached to this report as Attachment 3. UIMCC has approved the release of this audit information.*

Please contact me if you require additional information.

Sincerely,

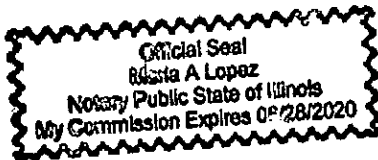


David Loring  
Chief Operating Officer

Acknowledgement

State of Illinois  
County of Cook

This instrument was acknowledged before me on September 13, 2017  
by Maria A Lopez



cc: Ms. Courtney Avery

Attachments:

1. Permit Alteration Notice
2. Equivalent Certificates of Payment and Waiver of Lien
3. Independent External Audit Final Project Cost IHFSRB #10-073



Hospital Administration

1740 W. Taylor Street  
Suite 1400, MC 693  
Chicago, Illinois 60612  
P 312-996-3900  
F 312-996-7049

October 27, 2016

Ms. Courtney Avery, Administrator  
Health Facilities and Services Review Board  
Illinois Department of Public Health  
525 West Jefferson Street, 2<sup>nd</sup> Floor  
Springfield, Illinois 62761

Re: Permit Alteration Notification Letter  
CON Permit 10-073  
University of Illinois Medical Center at Chicago  
Modernization Project

Dear Ms. Avery:

This letter is based on Section 1130.750, Alteration of Post-Permit Projects, which requires notification of any changes on an approved project.

Various circumstances require us to notify the Health Facilities and Services Review Board (HFSRB) that we anticipate changing the project by deleting the non-clinical kitchen modernization component, and related modernization costs, of our approved CON permit in the amount of \$1,020,000 (Attachment 18, Exhibit 1, Page 109, attached). Based on our interpretation of 1130.750, this change requires we notify the HFSRB of the anticipated project change by written notification and not file a "formal" alteration request. We trust you concur.

This anticipated non-clinical scope change in the approved CON project will not:

1. Impact on any clinical programs or beds
  2. Increase or decrease any existing sq. ft. (the associated space will remain "as is")
  3. Increase the approved project cost
  4. Change the amount of borrowed funds
  5. Otherwise require a CON Permit
-

UIMCC  
Proposed Permit Alteration Notification  
October 27, 2016  
Page 2 of 3

There may be other potential project changes that, due to the circumstances outlined in our annual progress reports and most recently approved permit renewal, require your advice so as to not invalidate our approved CON permit. Hence, we are requesting a meeting with your staff to review the project scope, as approved. I will be contacting you shortly to schedule a technical assistance meeting

If you have any questions regarding this notification letter, I can be reached at 312-996-3900 or by e-mail at [dhloff@uic.edu](mailto:dhloff@uic.edu).

Sincerely yours,



David H. Loffing  
Chief Operating Officer

Attachment: Original Permit Application Page 109

cc: Mike Constantino, Supervisor, Project Review Section  
George Roate, Project Reviewer  
Doug Swill, Drinker, Biddle & Reath LLP  
Janet Scheuerman, PRISM Healthcare Consulting  
Ed Parkhurst, PRISM Healthcare Consulting

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UIMCC  
 Proposed Permit Alteration Notification  
 October 27, 2016  
 Page 3 of 3

Cost per Department / Area

Department / Area	Space Allocation	Modernization Contracts *	Project Costs
<b>Clinical</b>			
Contemporary Procedure Support Bays	7,000	2,764,941	4,334,837
Ultrasound	4,750	1,843,294	2,888,891
Stem Cell Lab	1,295	788,777	1,200,582
Operating Room & Control	2,400	1,067,385	6,476,404
Sub-total	15,445	6,464,397	14,900,714
<b>Non-Clinical</b>			
Morgue Downsizing	1,960	1,183,166	1,800,872
Registration / Waiting / Sub-wait	3,200	350,352	432,703
Kitchen Remodel	13,000	1,020,000	1,701,000
Infrastructure	215,300	14,938,783	21,044,254
Physician Offices / Support	400	43,302	53,480
Sub-total	233,860	17,535,603	25,032,309
Total	249,305	24,000,000	39,933,023

\* Excluding contingencies

00 60 00 - Standard Contract Administration Forms (Single)

University of Illinois

DATE: 08/25/2017

Banner Doc #  
Address Sequence:

PAYMENT APPLICATION: PART IA - PAYMENT CERTIFICATE for  
No Assignment


Address Code:  
Check Print Location:  
1099? Y N  
End? Y N  
OBFS Approval:

PROJECT NAME: UIMCC Infrastructure Modernization and Renovation  
PROJECT #: (#949-C10030)  
APPLICANT NAME & ADDRESS: Huen Electric, Inc.  
1801 W. 16th Street, Broadview, IL 60155  
CONTRACT DIVISION: Division 05 - Electrical Work  
VENDOR REFERENCE:  
APPLICATION #: 009  
PAY PERIOD: 10/14/2013 TO 03/11/2014  
ENCUMBRANCE #E0015303  
FINAL PAYMENT? N  
BANNER VENDOR NUMBER:

<b>1.0 CURRENT CONTRACT/AGREEMENT AMOUNT</b>	
1.1 Applicant's Accepted Base Bid and Alternates as applicable	\$3,325,340.00
1.2 Authorized Change Orders for Applicant's Added Work:	+ \$535,145.63
1.2 Authorized Change Orders for Applicant's Deleted Work:	- \$0.00
<b>1.4 TOTAL (1.1 through 1.3)</b>	<b>\$3,860,485.63</b>
<b>2.0 CURRENT PAYMENT DUE</b>	
2.1 Total Value of Applicant's Work Completed to Date	\$3,860,485.63
2.2 Less 0% retained (round to nearest dollar):	- \$0.00
2.3 Less Payments Previously Certified	- \$3,814,011.49
<b>2.4 Current Payment Due to Applicant</b>	<b>\$46,474.14</b>

<b>3.1 Applicant's Certification</b> I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.  By: <u>Kara DiCola</u> Date <u>03/11/2014</u> Authorized Representative	<b>3.3 Professional Services Consultant's Certification</b> PSC VOA Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.  By: <u>Mervyn Redzenda</u> Date <u>03/11/2014</u> Authorized Representative
<b>3.2 Construction Manager's Certification (if applicable)</b> CM. Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.  By: _____ Date _____ Authorized Representative	<b>3.4 Owner's Representative's Approval</b> University of Illinois-construction unit responsible for the named project I approve payment of the amount certified above.  By: <u>Pamela Hill</u> Date <u>03/18/2014</u> Authorized Representative

CFOAPAL (* required fields)								
Chart *	Fund *	Organization *	Account *	Program *	Activity	Location	SEO #	\$
2	710297	487001	172404	198000		200949		\$46,474.14

<b>AUTHORIZED DEPARTMENT APPROVAL</b>  WE, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.  _____ AUTHORIZED CERTIFIER	<b>FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES</b> SORT  _____ CHAIRPERSON, BOARD OF TRUSTEES
---	--

Distribution: ☐ University of Illinois construction unit responsible for the named project ☐ Professional Services Consultant ☐ Contractor ☐ Applicant

Form approved by Legal Counsel - UOCP&RES  
06/13

00 60 00-4  
Single



**FINAL WAIVER OF LIEN**

STATE OF IL

Qty #

Loan #

COUNTY OF COOK } SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Office of Capital Program LLCto furnish Electricalfor the premises known as UIMC Infrastructure Modernization & Renovationof which Board of Trustees of University of Illinois

is the owner.

THE undersigned, for and in consideration of Forty Six Thousand Four Hundred Seventy Four and 14/100

( \$ 46,474.14 ) 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, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under Our handthis 20 day of March 2014Signature and Seal: John W Dougherty CEO

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.

STATE OF IL

COUNTY OF COOK } SS

**CONTRACTOR'S AFFIDAVIT**

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that(s) he is John W Dougherty CEO

of

the Huen Electric Incwho is the contractor for the Electrical work on thebuilding located at UIMC Infrastructure Modernization & Renovationowned by Board of Trustees of University of Illinois

that the total amount of the contract including extras is \$ 3,860,485.63 on which he has received payment of \$ 3,814,011.49 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
Huen Electric See Attached	Labor/Material	3,860,485.63	3,814,011.49	46,474.14	0.00
<b>TOTAL LABOR AND MATERIAL TO COMPLETE</b>		3,860,485.63	3,814,011.49	46,474.14	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.

Signed this 20 of March 2014Signature: John W Dougherty CEOSubscribed and sworn to before me this 20 day of March 2014

waiver: fm-CMpriforms

Notary



**HUEN ELECTRIC, INC.**  
**CONTRACTOR'S AFFIDAVIT ADDITIONAL STATEMENT**

**JOB NAME:** UIMC  
**Job #**3439  
**MONTH OF:** March 2014

NAME OF SUPPLIER	WHAT FOR	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
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Huen Electric, Inc.	Labor/Material	1,320,910.29	1,274,436.15	46,474.14	0.00
Walsh Construction	Install/Furnish	371,150.00	371,150.00	0.00	0.00
	Steel Metal Panel				
AVET Communication Inc	Misc. Material	321,968.09	321,968.09	0.00	0.00
Graybar	Misc. Material	1,143,334.21	1,143,334.21	0.00	0.00
ARS Contracting	Conduit/Fixtures	74,333.00	74,333.00	0.00	0.00
Gexpro	Misc. Material	54,900.00	54,900.00	0.00	0.00
Tri-Star	Electrical Material	475,361.48	475,361.48	0.00	0.00
Patten Energy	Material	21,728.00	21,728.00	0.00	0.00
J&A Sheet	Trough	7,172.00	7,172.00	0.00	0.00
High Voltage	Electrical Material	27,630.48	27,630.48	0.00	0.00
United Rentals	Fork Lift	41,998.08	41,998.08	0.00	0.00
<b>TOTAL LABOR AND MATERIAL TO COMPLETE</b>		<b>3,860,485.63</b>	<b>3,814,011.49</b>	<b>46,474.14</b>	<b>0.00</b>

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.

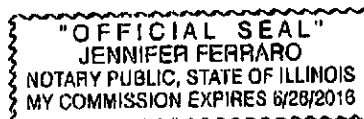
Signed this 20th day of March 2014

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

John W Dougherty CEO

Subscribed and sworn to before me this 20th day of March 2014

\_\_\_\_\_  
 - Notary



**UNIVERSITY OF ILLINOIS AT CHICAGO**  
**SUBCONTRACTOR FINAL WAIVER OF LIEN**

STATE OF ILLINOIS }  
 COUNTY OF Cook } SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Kroeschell, Inc.  
 to furnish HVAC Mechanical Services & Equipment  
 for the project known as 949-C12029 - UIMC Interior Renovations and Mechanical Upgrades  
 of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner

THE undersigned, for all in consideration of One Hundred Fifty Seven Thousand Six Hundred and 00/100  
\$157,600.00 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 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

JOSE GARCIA

and seal

Garco Enterprises, Inc.

4th

day of

March

20 14

COMPANY NAME Garco Enterprises, Inc

Signature and Seal

NOTE: All waivers must be for the full amount paid. If the 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.

State Of: Illinois

County Of: Cook

Sworn and Subscribed before me on this

10th day of April, 2017

My Commission Expires: 10/29/17

OFFICIAL SEAL  
 SHEILA K. FRISBIE  
 NOTARY PUBLIC - STATE OF ILLINOIS  
 MY COMMISSION EXPIRES: 10/29/17

**UNIVERSITY OF ILLINOIS AT CHICAGO**  
**SUBCONTRACTOR FINAL WAIVER OF LIEN**

STATE OF ILLINOIS }  
COUNTY OF Cook } SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Kroeschell Engineering Co  
to furnish Control Wiring  
for the project known as 949-C12029 - UIMC Interior Renovations and Mechanical Upgrades  
of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner

THE undersigned, for all in consideration of One Hundred Seventeen Thousand & 00/100  
\$117,000 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 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 Kevin M Prior, Operations Manager and seal Convergent Technologies LLC this  
7th day of April, 2017

COMPANY NAME Convergent Technologies LLC Signature and Seal: 

NOTE: All waivers must be for the full amount paid. If the 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.

**UNIVERSITY OF ILLINOIS AT CHICAGO**  
**SUBCONTRACTOR FINAL WAIVER OF LIEN**

STATE OF ILLINOIS }  
 COUNTY OF Cook } ss

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Kroeschell, Inc  
 to furnish HVAC Mechanical Services & Equipment  
 for the project known as 949-C12029 - UIMC Interior Renovations and Mechanical Upgrades  
 of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner

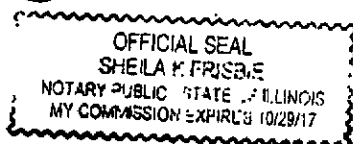
THE undersigned, for all in consideration of Eight Thousand Three Hundred Twenty and 00/100  
\$8,320.00 Dollars, and other good and valuable consideration, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or  
 claim of, or right to, lien, under the statutes 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 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 Jeff Garcia and seal Garco Enterprises, Inc  
14th day of July, 2014

COMPANY NAME Garco Enterprises, Inc Signature and Seal: 

NOTE: All waivers must be for the full amount paid. If the 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.

State Of: Illinois  
 County Of: Cook  
 Sworn and Subscribed before me on this  
10th day of July, 2017  
 My Commission Expires: 10/29/17



**UNIVERSITY OF ILLINOIS AT CHICAGO**  
**SUBCONTRACTOR FINAL WAIVER OF LIEN**

STATE OF ILLINOIS }  
COUNTY OF Cook } SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Kroeschell, Inc  
to furnish HVAC Mechanical Services & Equipment  
for the project known as 949-C12029 - UIMC Interior Renovations and Mechanical Upgrades  
of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner

THE undersigned, for all in consideration of Sevanty Two Thousand One Hundred Three and 00/100  
\$72,103.00 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 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 Jeff Garcia and Garco Enterprises Inc  
14th day of July, 2014

COMPANY NAME Garco Enterprises, Inc Signature and Seal [Signature]

NOTE: All waivers must be for the full amount paid. If the 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

State Of: Illinois  
County Of: Cook  
Sworn and Subscribe before me on this  
10th Day of April, 2017  
[Signature]  
My Commission Expires: 10/29/17

OFFICIAL SEAL  
SHEILA K FRISBIE  
NOTARY PUBLIC - STATE OF ILLINOIS  
MY COMMISSION EXPIRES: 10/29/17

# University of Illinois at Chicago FINAL WAIVER OF LIEN

STATE OF ILLINOIS  
COUNTY OF Cook } SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

to furnish Temperature Control

for the project known as University of Illinois at Chicago 949-C12029

of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner

THE undersigned, for all in consideration of Seventy Four Thousand Five Hundred Twenty Five Dollars 00/100  
\$74,525.00 Dollars, and other good and valuable consideration, the receipt whereof is hereby acknowledged, de(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, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under 7th my hand Doreen Seratt and seal Kroeschell Engineering Co., Inc.  
day of June, 20 17

COMPANY NAME Kroeschell Engineering Co., Inc.

Signature and Seal: [Signature]

NOTE: All waivers must be for the full amount paid. If the 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 } SS

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he is Doreen Seratt  
Assistant of the Kroeschell Engineering Co., Inc  
who is the contractor for the project known as 949-C12029 UIMC Interior Renovations and Mechanical Upgrades of which  
THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner  
That the total amount of the contract including extras is \$1,359,028.61 on which he has received payment of  
\$1,284,503.61 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:

SUBCONTRACTOR NAME	SUBCONTRACTOR FEIN	DIVISION OF WORK	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Kroeschell	36-134970	07	\$1,004,005.61	\$929,480.61	\$74,525.00	\$0.00
Garco Enterprises	36-3949915	07	\$8,320.00	\$8,320.00	\$0.00	\$0.00
Garco Enterprises	36-3949915	07	\$72,103.00	\$72,103.00	\$0.00	\$0.00
Garco Enterprises	36-3944915	07	\$157,600.00	\$157,600.00	\$0.00	\$0.00
Convergint		07	\$117,000.00	\$117,000.00	\$0.00	\$0.00
TOTAL LABOR AND MATERIAL COMPLETED			\$1,359,028.61	\$1,284,503.61	\$74,525.00	\$0.00

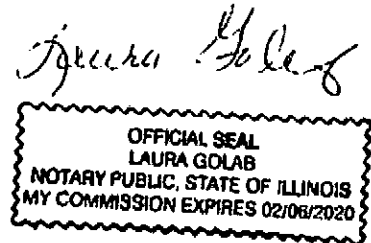
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 7th day of June  
at 17  
Signature: [Signature]

University of Illinois at Chicago  
**FINAL WAIVER OF LIEN**

Subscribed and sworn to before me this 7 day of June

20 17





## FINAL WAIVER OF LIEN

STATE OF ILLINOIS

Qty # \_\_\_\_\_

COUNTY OF WILL

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

TO WHOM IT MAY CONCERN

WHEREAS the undersigned has been employed by TITAN ELECTRICto furnish ELECTRICAL MATERIAL

for the premises known as

UIMC MECH UPGRADES DIV 5

of which

University of Illinois at Chicago

Is the owner

THE undersigned, for and in consideration of

Two hundred eight thousand nine hundred seventy six 14/100(\$ 208,976.14 )

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: 4/5/17

Company Name

Express Electric Supply

Address

11535 W 183rd Pl Unit 108 Orland Park, IL 60467

SIGNATURE AND TITLE

Rodney Thompson, President

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

## CONTRACTOR'S AFFIDAVIT

STATE OF IL

COUNTY OF WILL

TO WHOM IT MAY CONCERN:

THE UNDERSIGNED,  
AND SAYS THAT HE OR SHE IS

Rodney Thompson

BEING DULY SWORN, DEPOSES

President

OF

Express Electric Supply

WHO IS THE CONTRACTOR FURNISHING

electrical materialWORK ON THE BUILDING

LOCATED AT

1740 West Taylor St Chicago, IL

OWNED BY

University of Illinois at Chicago

That the total amount of the contract including extras\* is \$ \$1,185,642.86 on which he or she has received payment of \$ 976,666.72 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 have 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 INCLUDING EXTRAS*	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
<u>Express Electric Supply</u>	<u>electrical material</u>	<u>\$1,185,642.86</u>	<u>\$976,666.72</u>	<u>\$208,976.14</u>	<u>\$0.00</u>
<u>11535 W 183rd Pl Unit 108</u>					
<u>Orland Park, IL 60467</u>					
<u>Material from our fully paid stock Delivered to jobsite by our truck All labor and benefits fully paid</u>					
<u>Total Labor and Materials Including Extras* To Complete</u>		<u>\$1,185,642.86</u>	<u>\$976,666.72</u>	<u>\$208,976.14</u>	<u>\$0.00</u>

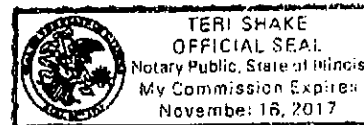
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done upon or in connection with said work other than above stated

Signed this 5th day of April 2017

Signature

Notary:

\*Extras include but are not limited to change orders, both oral and written, to contract.



00 60 00 - Standard Contract Administration Forms (Multiple)

University of Illinois

DATE: 08/25/2017

Banner Doc #

Address Sequence:

**PAYMENT APPLICATION: PART IA - PAYMENT CERTIFICATE for  
Assigned Subcontractor**

Address Code:

Check Print Location:

1099? Y N

Encl? Y N

OBFS Approval:

PROJECT NAME: 949-C12029 UIMC Interior

PROJECT #: (#949-C12029)

Renovations and Mechanical Upgrades

APPLICANT NAME &amp; ADDRESS: Kroeschell Engineering Co., Inc

3222 North Kennicott Ave, Arlington Heights, IL 60004

CONTRACT DIVISION: Division 07 - Temperature Control Work

VENDOR REFERENCE:

ENCUMBRANCE #E0015313

APPLICATION #: 020

FINAL PAYMENT? N

PAY PERIOD: 04/16/2015 TO 02/28/2017

BANNER VENDOR NUMBER:

**1.0 CONTRACTOR'S TOTAL CONSTRUCTION CONTRACT SUM****AND ALL CHANGE ORDERS (total of attached SWC)***(N/A to Assigned Subcontractor's Payment Application)***2.0 CURRENT CONTRACT/AGREEMENT AMOUNT**

2.1 Applicant's Accepted Base Bid and Alternates:

\$1,148,750.00

2.2 Authorized Change Orders for Applicant's Added Work:

+ \$245,930.29

2.3 Authorized Change Orders for Applicant's Deleted Work:

- \$35,651.66

**2.4 TOTAL (2.1 through 2.3)**

\$1,359,028.61

**3.0 CURRENT PAYMENT DUE**

3.1 Total Value of Applicant's Work Completed to Date

\$1,359,028.61

3.2 Less 0% retained (round to nearest dollar):

- \$0.00

3.3 Less Payments Previously Certified

- \$1,284,504.00

**3.4 Current Payment Due to Applicant**

\$74,524.61

**4.1 Assigned Subcontractor's Certification**

I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By Laura Solob1 Date 03/09/2017  
Authorized Representative

**4.2 Contractor's Approval**Contractor Mechuda Construction, Inc.

I agree that the Assigned Subcontractor's progress and performance to date on this project is satisfactory and approve payment of the certified amount.

IF CONTRACTOR'S PAY APPLICATION: I also certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By Boon Mole Date 03/09/2017  
Authorized Representative

**4.3 Professional Services Consultant's Certification**

PSC

Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By Steve Whit Date 03/13/2017  
Authorized Representative


**4.4 Owner's Representative's Approval\***

University of Illinois-construction unit responsible for the named project approve payment of the amount certified above.

By Pamela Hill Date 03/15/2017  
Authorized Representative

\* Certification only required for Contractor's Payment Application

CFOAPAL (* required fields)								
Chart *	Fund *	Organization *	Account *	Program *	Activity	Location	SEQ #	\$
2	710297	467001	173406	186000		200949		\$74,524.61

	AUTHORIZED DEPARTMENT APPROVAL WE, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.	FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES   SORY
	AUTHORIZED CERTIFIER	CHAIRPERSON, BOARD OF TRUSTEES

Distribution: ☐ : University of Illinois construction unit responsible for the named project ☐ Professional Services Consultant ☐ Contractor ☐ Applicant

Form approved by Legal Counsel - UOCP&RES  
06/13

00 60 00-4  
Multiple

00 60 00 - Standard Contract Administration Forms (Multiple)

University of Illinois

DATE: 08/25/2017

Banner Doc #

Address Sequence:

**PAYMENT APPLICATION: PART IA - PAYMENT CERTIFICATE for  
Assigned Subcontractor**

Address Code:

Check Print Location:

1099? Y N

End? Y N

OBFS Approval:

**PROJECT NAME:** 949-C12029 UIMC Interior**PROJECT #:** (#949-C12029)**Renovations and Mechanical Upgrades****APPLICANT NAME & ADDRESS:** MTS Titan Electric

1050 Spring Lake Dr., Itasca, IL 60143

**CONTRACT DIVISION:** Division 05 - Electrical Work**VENDOR REFERENCE:****APPLICATION #:** 019**ENCUMBRANCE #**E0015312**FINAL PAYMENT?** N**PAY PERIOD:** 10/01/2014 TO 02/24/2017**BANNER VENDOR NUMBER:****1.0 CONTRACTOR'S TOTAL CONSTRUCTION CONTRACT SUM****AND ALL CHANGE ORDERS (total of attached SWC)**

(N/A to Assigned Subcontractor's Payment Application)

**2.0 CURRENT CONTRACT/AGREEMENT AMOUNT****2.1 Applicant's Accepted Base Bid and Alternates:**

\$3,136,630.00

**2.2 Authorized Change Orders for Applicant's Added Work:**

+ \$622,991.56

**2.3 Authorized Change Orders for Applicant's Deleted Work:**

- \$183,702.32

**2.4 TOTAL (2.1 through 2.3)**

\$3,575,919.24

**3.0 CURRENT PAYMENT DUE****3.1 Total Value of Applicant's Work Completed to Date**

\$3,575,919.24

**3.2 Less 0% retained (round to nearest dollar):**

- \$0.00

**3.3 Less Payments Previously Certified**

- \$3,501,993.44

**3.4 Current Payment Due to Applicant**

\$73,925.80

**4.1 Assigned Subcontractor's Certification**

I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By Ryan Smith Date 02/24/2017

Authorized Representative

**4.2 Contractor's Approval**Contractor Metz Construction, Inc.

I agree that the Assigned Subcontractor's progress and performance to date on this project is satisfactory and approve payment of the certified amount.

IF CONTRACTOR'S PAY APPLICATION: I also certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By Brian Mohr Date 02/28/2017

Authorized Representative

**4.3 Professional Services Consultant's Certification**

PSC

Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By Steve Wall Date 03/13/2017

Authorized Representative

**4.4 Owner's Representative's Approval\***


University of Illinois-construction unit responsible for the named project approve payment of the amount certified above.

By Pamela Hill Date 03/15/2017

Authorized Representative

\* Certification only required for Contractor's Payment Application

CFOAPAL (* required fields)								
Chart *	Fund *	Organization *	Account *	Program *	Activity	Location	SEQ #	\$
2	710297	467001	173404	199000		200949		\$73,925.80

<b>AUTHORIZED DEPARTMENT APPROVAL</b>		<b>FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES</b>	
	I, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.		
	CHAIRPERSON, BOARD OF TRUSTEES		
AUTHORIZED CERTIFIER			

 Distribution: ☐ University of Illinois construction unit responsible for the named project ☐ Professional Services Consultant ☐ Contractor ☐ Applicant

 Form approved by Legal Counsel - UOCP&RES  
08/13

 00 60 00-4  
Multiple

## FINAL WAIVER OF LIEN

Illinois  
Footnote

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

RECEIVED MAY 19 1961

*Journal of Interpersonal Violence* 26(10)

University of Illinois at Chicago

## Electrical Work

UIMC - Much Upgrades Div 5 Electrical 1740 West Taylor St  
University of Illinois at Chicago

for the sum of Seventy Three thousand Nine Hundred twenty Six Dollars And Twenty Nine Cents (\$73,926.29) Dollars, and to defend and reimburse the above the except amount of the hereby acknowledged amount hereby acknowledged by the above the sum of or right to pay, under the State of Illinois, various to merchants here with respect to and to the above described goods and the improvements thereon and on the personal fixtures, contents of machinery furnished, and on the moneys, funds or other things, which may be due from the dealer or a merchant of the above named parties, operators of machinery furnished of which the above the sum of or right to pay, here due to the above signed for the merchandise and for the above described premises, INCD 1081812 EXTRAS

February 25, 2017

• NOSE AND BLADDER

**ritan Electric, LLC**

CONCLUSIONS

1050 Spring Lake Dr Masca IL 60143

SIGNATURE AND TITLE

**Anam Sandefur** Controller

IS INCORPORATED AND NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

# CONTRACTOR'S AFFIDAVIT

STAFF OF                      HERDIE                      HERDIE  
COUNCIL OF                      HERDIE                      HERDIE

24) WHOM IT MAY CONCERN:

1111 0000 1111 1111 1111 1111 1111 1111

Adam Sandeher

REPLACES THE 1987 SMC 0501 (2-1-87)

[illegible]

### Controlles

WHO IS THE

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Titan Electric LLC

GOING ON THE BUS DINKS

1993, 1994, 1995, 1996, 1997, 1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 26

## Electric Work

• • • • •

1740 West Taylor St.

University of Illinois at Chicago

53 575,919 24 on which he or she has received payment of

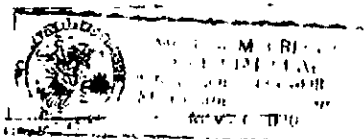
[illegible][illegible]

the above

1. The author of the article, "The Role of the Teacher in the Classroom," is a well-known expert in the field of education. The author's name is [Name], and they are a [Title] at [Institution].

January 28, 1967

### 1.3. NAME CLIFFS

[illegible][illegible]

00 60 00 - Standard Contract Administration Forms (Multiple)

University of Illinois

DATE: 08/25/2017

Banner Doc #

Address Sequence:

PAYMENT APPLICATION: PART IA - PAYMENT CERTIFICATE for  
Assigned Subcontractor

Address Code:  
Check Print Location  
1099? Y N  
Encl? Y N  
OBFS Approval:

PROJECT NAME: 949-C12029 UIMC Interior  
Renovations and Mechanical Upgrades

PROJECT #: (#949-C12029)

APPLICANT NAME & ADDRESS: Flo-Tech mechanical systems, Inc.  
1304 W. National Ave, Addison, IL 60101

CONTRACT DIVISION: Division 04 - Ventilation and Air Distribution Work

VENDOR REFERENCE:

ENCUMBRANCE #E0015311;  
E0015311

FINAL PAYMENT? N

APPLICATION #: 022

PAY PERIOD: 06/01/2016 TO 02/23/2017

BANNER VENDOR NUMBER:

**1.0 CONTRACTOR'S TOTAL CONSTRUCTION CONTRACT SUM**

AND ALL CHANGE ORDERS (total of attached SWC)

(N/A to Assigned Subcontractor's Payment Application)

**2.0 CURRENT CONTRACT/AGREEMENT AMOUNT**

2.1 Applicant's Accepted Base Bid and Alternates: \$2,743,000.00

2.2 Authorized Change Orders for Applicant's Added Work: \$173,299.32

2.3 Authorized Change Orders for Applicant's Deleted Work: - \$8,190.00

2.4 TOTAL (2.1 through 2.3) \$2,908,109.32

**3.0 CURRENT PAYMENT DUE**

3.1 Total Value of Applicant's Work Completed to Date \$2,908,109.32

3.2 Less 0% retained (round to nearest dollar): - \$0.00

3.3 Less Payments Previously Certified - \$2,876,299.32

3.4 Current Payment Due to Applicant \$31,810.00

**4.1 Assigned Subcontractor's Certification**

I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By: Abd Wahid Omer Date 02/24/2017  
Authorized Representative

**4.2 Contractor's Approval**

Contractor Mechute Construction, Inc.  
I agree that the Assigned Subcontractor's progress and performance to date on this project is satisfactory and approve payment of the certified amount.

IF CONTRACTOR'S PAY APPLICATION: I also certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By: Brian McIn Date 02/24/2017  
Authorized Representative

**4.3 Professional Services Consultant's Certification**

PSC:  
Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By: Steve Hill Date 03/13/2017  
Authorized Representative


**4.4 Owner's Representative's Approval \***

University of Illinois-construction unit responsible for the named project approve payment of the amount certified above.

By: Patricia Hill Date 03/15/2017  
Authorized Representative

\* Certification only required for Contractor's Payment Application

CFOAPAL (* required fields)							
Chan *	Fund *	Organization *	Account *	Program *	Activity	Location	SEQ #
2	710297	487001	173403	188000		200949	\$31,810.00

	WE, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.	<b>FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES</b>	<b>SORT</b>
	AUTHORIZED CERTIFIER	CHAIRPERSON, BOARD OF TRUSTEES	

Distribution: ☐ University of Illinois construction unit responsible for the named project ☐ Professional Services Consultant ☐ Contractor ☐ Applicant

Form approved by Legal Counsel - UOCP&RES  
06/13

00 60 00-4  
Multiple

## FINAL WAIVER OF LIEN

STATE OF ILLINOIS  
COUNTY OF DUPAGE }

SS

Gyt # \_\_\_\_\_ Chicago  
Escrow # \_\_\_\_\_

TO WHOM IT MAY CONCERN

WHEREAS the undersigned has been employed by University of Illinois at Chicago  
to furnish HVAC Systems  
for the premises known as University of Illinois Medical Center  
of which Office of Capital Programs is the owner  
THE undersigned, for and in consideration of Thirty-One Thousand Eight Hundred Ten Dollars and 00/100  
\$31,810.00 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 (ILL. Public Constr.) Bond Act, to  
the same extent the undersigned waives and releases any and all lien or claim of, or right to lien under 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 anytime time hereafter, by the undersigned for the above-  
described premises, INCLUDING EXTRAS.\*

DATE 03/15/17

COMPANY NAME Flo-Tech Mechanical systems, Inc  
ADDRESS 1300 National Ave, Addison, IL 60101

SIGNATURE AND TITLE

(President)

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

## CONTRACTOR'S AFFIDAVIT

STATE OF ILLINOIS  
COUNTY OF DUPAGE }SS  
SS

TO WHOM IT MAY CONCERN

The undersigned, Abe Wahid being duly sworn, deposes and  
says that he or she is President of  
Flo-Tech Mechanical systems, Inc who is the  
contractor furnishing HVAC Systems work on  
building located at 1740 West Taylor St. Chicago, IL 60612  
owned by Office of Capital Programs  
That the total amount of the contract including extras is \$ 2,908,109.32 on which he has received payment of  
\$2,876,299.32 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
Flo-Tech Mechanical Systems, Inc.	Duct Material	\$1,584,889.32	\$1,532,879.32	\$31,810.00	\$0.00
Air flow Company	Fans, VAV Damp	\$39,350.00	\$39,350.00	\$0.00	\$0.00
Trane	AHU's	\$1,304,070.00	\$1,304,070.00	\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS* TO COMPLETE		\$2,908,109.32	\$2,876,299.32	\$31,810.00	\$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 3/15/17

SIGNATURE

SUBSCRIBED AND SWORN TO BEFORE ME THIS

15TH

DAY OF MARCH 2017

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

NOTARY PUBLIC

SWAHID  
Official Seal  
Notary Public - State of Illinois  
My Commission Expires Apr 13, 2021

**FINAL WAIVER OF LIEN**

STATE OF Illinois

COUNTY OF Will

} SS

Gty # 30456 Final

Loan #

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by The Board of Trustees of the University of Illinois  
 to furnish Division 3 Heating Work  
 for the premises known as UIMC Interior Renovations and Mechanical Upgrades (#949-C12029)  
 of which The Board of Trustees of the University of Illinois is the owner.

THE undersigned, for and in consideration of Four hundred fifty-five dollars & no/100  
 (\$ 455.00 ) 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 heretofore furnished, or which may be  
 furnished at any time hereafter, by the undersigned for the above-described premises.

Given under My hand Jeffrey A. Malizia, President and seal On this  
23rd day of March, 2017

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.

STATE OF Illinois

COUNTY OF Will

} SS

**CONTRACTOR'S AFFIDAVIT**

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he is Jeffrey A. Malizia, President  
 of the Quality Control Systems, Inc. who is the contractor for the Division 3 Heating Work  
 work on the building located at 1740 W. Taylor Street, Chicago, Illinois  
 owned by The Board of Trustees of the University of Illinois  
 That the total amount of the contract including extras is \$ 3,162,003.43 on which he has received payment of  
 \$ 3,161,548.43 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
Quality Control Systems	363961115 - HVAC	2,373,854.73	2,373,194.39	460.34	-0.00
National Insulation	364264229- Insulation	690,928.70	690,934.04	-5.34	-0.00
Bornquist	363458789 Pumps & Spec	97,420.00	97,420.00	0.00	0.00
TOTAL LABOR AND MATERIAL TO COMPLETE		3,162,003.43	3,161,548.43	455.00	-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 upon or in connection with said work other than above stated.

Signed this 23rd day of March, 2017

Signature:

Subscribed and sworn before me this 23rd day of March, 2017

NOTARY PUBLIC, STATE OF ILLINOIS

NOTARY PUBLIC, STATE OF ILLINOIS

NOTARY PUBLIC, STATE OF ILLINOIS

NOTARY PUBLIC, STATE OF ILLINOIS

Notary

**FINAL WAIVER OF LIEN**

STATE OF ILLINOIS

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

COUNTY OF COOK

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

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by QUALITY CONTROL SYSTEMS, INC. to furnish INSULATION for the premises known as UIMC INTERIOR RENOVATION of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner

THE undersigned, for and in consideration MINUS FIVE DOLLAR AND 34/100 (\$5.34) and other good and valuable considerations, the receipt whereof is hereby acknowledged, do (ss) hereby waive and release any and all liens or claims of, or rights 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 to this date by the undersigned on the above-described premises.

Given under my hand and seal this 25th day of March, 2017.

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/herself 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 is PRESIDENT of the NATIONAL INSULATION, INC. who is the INSULATION contractor for the building located at 1740 W. TAYLOR STREET, CHICAGO, IL, owned by THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS. That the total amount of the contract including extras is \$890,928.70 on which he/she has received payment of \$890,934.04 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
NATIONAL INSULATION, INC.	INSULATION	\$890,928.70	\$890,934.04	(\$5.34)	\$0.00
TOTAL LABOR & MAT'L TO COMPL.		\$890,928.70	\$890,934.04	(\$5.34)	\$0.00

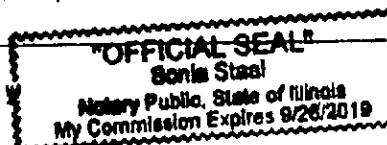
That there are no other contracts for said work outstanding, and that there is nothing due or to become due to any person for material, labor or other work of any kind done or to be done upon or in connection with said work other than above stated.

Signed this 25th day of March, 2017.

Signature: \_\_\_\_\_

Subscribed and sworn to before me this 25th day of March, 2017

Subscribed and sworn to before me !  
 this 25 day of March, 2017  
 at County of Cook, State of Illinois.  
 Notary Public Sonia Staal





**UNIVERSITY OF ILLINOIS AT CHICAGO**  
**SUBCONTRACTOR FINAL WAIVER OF LIEN**

STATE OF ILLINOIS }  
COUNTY OF Cook } SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Kroeschell, Inc  
to furnish HVAC Mechanical Services & Equipment  
for the project known as 949-C12029 - UIMC Interior Renovations and Mechanical Upgrades  
of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner.

THE undersigned, for all in consideration of Forty One Thousand Eight Hundred Twenty Five and 00/100  
\$41,825.00 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 at, 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, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under Hand hand of the undersigned and seal of the undersigned  
14th day of July, 2014

COMPANY NAME Garco Mechanical Insulation & Firestopping, Inc Signature and Seal: [Signature]

NOTE: All waivers must be for the full amount paid. If the 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.

State Of: Illinois

County Of: Cook

Sworn and Subscribe before me on this

10th Day of April, 2017

[Signature]

My Commission Expires: 10/29/17



## Attachment 2

00 60 00 - Standard Contract Administration Forms (Multiple)

University of Illinois

DATE: 08/25/2017

Banner Doc #

Address Sequence:

**PAYMENT APPLICATION: PART 1A - PAYMENT CERTIFICATE for**  
Assigned Subcontractor

Address Code:

Check Print Location:

1099? Y N

Encl? Y N

OBFS Approval:

**PROJECT NAME:** 949-C12029 UIMC Interior  
Renovations and Mechanical Upgrades

**PROJECT #:** (#949-C12029)**APPLICANT NAME & ADDRESS:** Quality Control Systems Inc.

1336 W. New Monee Road, Crete, IL 60417

**CONTRACT DIVISION:** Division 03 - Heating, Piping, Refrigeration, and Temperature Control Work**VENDOR REFERENCE:****APPLICATION #:** 019**PAY PERIOD:** 06/09/2016 TO 02/22/2017**ENCUMBRANCE #**E0015310**FINAL PAYMENT?** N**BANNER VENDOR NUMBER:****1.0 CONTRACTOR'S TOTAL CONSTRUCTION CONTRACT SUM****AND ALL CHANGE ORDERS (total of attached SWC)**

(N/A to Assigned Subcontractor's Payment Application)

**2.0 CURRENT CONTRACT/AGREEMENT AMOUNT**

2.1 Applicant's Accepted Base Bid and Alternates: \$3,094,000.00

2.2 Authorized Change Orders for Applicant's Added Work: + \$100,448.43

2.3 Authorized Change Orders for Applicant's Deleted Work: - \$32,445.00

**2.4 TOTAL (2.1 through 2.3)**

\$3,162,003.43

**3.0 CURRENT PAYMENT DUE**

3.1 Total Value of Applicant's Work Completed to Date \$3,162,003.43

3.2 Less 0% retained (round to nearest dollar): - \$0.00

3.3 Less Payments Previously Certified - \$3,161,548.43

3.4 Current Payment Due to Applicant \$455.00

**4.1 Assigned Subcontractor's Certification**

I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By Gina Laxowski Date 02/22/2017

Authorized Representative

**4.2 Contractor's Approval**Contractor: Michoud Construction Inc.

I agree that the Assigned Subcontractor's progress and performance to date on this project is satisfactory and approve payment of the certified amount.

OF CONTRACTOR'S PAY APPLICATION: I also certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By Dan Mohr Date 02/24/2017

Authorized Representative

**4.3 Professional Services Consultant's Certification**

PSC

Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By Steve Wall Date 03/13/2017

Authorized Representative

**4.4 Owner's Representative's Approval \***

University of Illinois-construction unit responsible for the named project approve payment of the amount certified above.

By Pamela Hill Date 03/15/2017

Authorized Representative

\* Certification only required for Contractor's Payment Application

CFOAPAL (* required fields)								
Class *	Fund *	Organization *	Account *	Program *	Activity	Location	SEQ #	\$
2	710297	467001	173402	198000		200949		\$455.00

**AUTHORIZED DEPARTMENT APPROVAL**

WE, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.

**FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES**

SORT

CHAIRPERSON, BOARD OF TRUSTEES

AUTHORIZED CERTIFIER

Distribution: ☐ University of Illinois construction unit responsible for the named project ☐ Professional Services Consultant ☐ Contractor ☐ Applicant

Form approved by Legal Counsel - UOCP&RES  
05/13

00 60 00-4  
Multiple

## UNIVERSITY OF ILLINOIS AT CHICAGO

**SUBCONTRACTOR FINAL WAIVER OF LIEN**

STATE OF ILLINOIS  
COUNTY OF Cook } ss

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by Kroeschell Engineering Co.

to furnish Plumbing Supplies

for the project known as 949-C12029 - UIMC Interior Renovations and Mechanical Upgrades

of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner

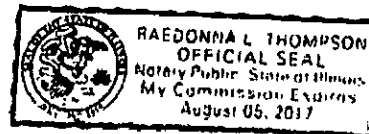
THE undersigned, for all in consideration of Ninety Five Thousand Nine Hundred Eight and 93/100 Cents  
95,908.93 Dollars, and other good and valuable consideration, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or claim of, or right to, lien, under the 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 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 in Hisip and seal St. Clair State of IL this  
1TH day of April 20 17

COMPANY NAME RAE PRODUCTS AND CHEMICALS

Signature and Seal

NOTE: All waivers must be for the full amount paid. If the 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



**UNIVERSITY OF ILLINOIS AT CHICAGO**  
**SUBCONTRACTOR FINAL WAIVER OF LIEN**

STATE OF ILLINOIS }  
COUNTY OF COOK } SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by KROESCHELL ENGINEERING CO.

to furnish PLUMBING

for the project known as 949-C12029 - UIMC Interior Renovations and Mechanical Upgrades

of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner.

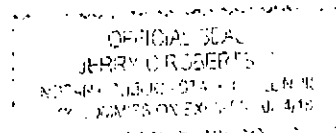
THE undersigned, for all in consideration of SIXTY THREE THOUSAND FOUR HUNDRED FORTY SEVEN AND 00/100  
\$63,447.00 Dollars, and other good and valuable consideration, the receipt whereof is hereby acknowledged, do(es) hereby waive and release any and all lien or  
claim of, or right to, lien, under 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 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 SHARON ROBERTS and seal J.S.R. ENTERPRISES INC. this  
28TH day of APRIL, 20 17

COMPANY NAME J.S.R. ENTERPRISES INC

Signature and Seal: *Sharon Roberts*

NOTE: All waivers must be for the full amount paid. If the 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.



*[Handwritten signatures and initials]*

# University of Illinois at Chicago FINAL WAIVER OF LIEN

STATE OF ILLINOIS  
COUNTY OF Cook } SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

to furnish Plumbing

for the project known as University of Illinois at Chicago 949-C12029

of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner

THE undersigned, for all in consideration of Thirty Six Thousand Six Hundred Three Dollars 00/100  
\$36,603.00 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 labor, services, material, fixtures, apparatus or machinery, hereinafter furnished, or which may be furnished at any time hereafter, by the undersigned for the above-described premises.

Given under my hand, Doreen Seratt and seal Kroeschell Engineering Co., Inc.  
31st day of May, 20 17

COMPANY NAME Kroeschell Engineering Co., Inc.

Signature and Seal [Signature]

NOTE: All waivers must be for the full amount paid. If the 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 } SS

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he is Doreen Seratt  
Assistant Secretary of the Kroeschell Engineering Co., Inc.  
who is the contractor for the project known as 949-C12029 UIMC Interior Renovations and Mechanical Upgrades of which  
THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner  
That the total amount of the contract including extras is \_\_\_\_\_ on which he has received payment of  
\$1,101,449.62 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:

SUBCONTRACTOR NAME	SUBCONTRACTOR FEIN	DIVISION OF WORK	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Kroeschell Engineering	36-1343970	02	\$903,907.54	\$881,251.54	\$22,656.00	\$0.00
RAE Products	36-2895651	02	\$95,908.93	\$95,908.93	\$0.00	\$0.00
J.S.R	36-3469972	02	\$63,447.00	\$49,500.00	\$13,947.00	\$0.00
Garco Mechanical Insulation & Firestopping	36-3944915	02	\$41,825.00	\$41,825.00	\$0.00	\$0.00
Every Blooming Industry Supply	36-2895651	02	\$32,964.15	\$32,964.15	\$0.00	\$0.00
TOTAL LABOR AND MATERIAL COMPLETED			\$1,138,052.62	\$1,101,449.62	\$36,603.00	\$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.

Signed this 31st day of May

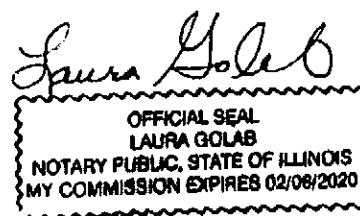
20 17

Signature: [Signature]

University of Illinois at Chicago  
**FINAL WAIVER OF LIEN**

Subscribed and sworn to before me this 31<sup>st</sup> day of May

202017



University of Illinois Medical Center Interior Renovation and Mechanical Upgrade		CONTRACT	AMOUNT	THIS	BALANCE
NAMES	WHAT FOR	PRICE	PAID	PAYMENT	DUE
Michels Construction Inc	General Contractor	\$ 3,826,438.17	\$ 3,324,861.38	\$ 400,878.82	\$ (0.00)
Hydro Park Environmental Service Inc	Selective Demo	\$ 728,768.34	\$ 689,478.01	\$ 38,288.33	\$ -
TAC Construction Company	Concrete & Masonry	\$ 137,888.57	\$ 128,179.83	\$ 8,708.74	\$ -
Synergy Steel Structures, Inc.	Structural Steel	\$ 525,818.00	\$ 483,884.87	\$ 41,733.13	\$ -
KBI Custom Case, Inc.	Millwork	\$ 214,834.45	\$ 214,243.76	\$ 590.70	\$ -
Combined Roofing Services, LLC	Roofing	\$ 48,482.46	\$ 48,038.34	\$ 444.12	\$ (0.00)
Arango Door Company, Inc.	Celling Door	\$ 8,008.88	\$ 8,000.80	\$ 8.08	\$ -
DeKalb Contract Glazing, Inc.	Glazing	\$ 73,898.42	\$ 70,513.66	\$ 3,384.76	\$ -
Hunter D & T, Inc.	Gypsum Board/Acoustical Ceiling/Doors	\$ 1,303,233.67	\$ 1,238,072.18	\$ 65,161.49	\$ -
DTI of Illinois, Inc.	Ceramic Tile	\$ 111,427.81	\$ 105,618.93	\$ 5,808.88	\$ -
Noland Sales Corporation	Resilient Flooring	\$ 238,164.32	\$ 225,207.77	\$ 12,956.55	\$ -
Manconi Terrazzo, LLC	Terrazzo	\$ 127,468.02	\$ 121,388.72	\$ 6,079.30	\$ -
Ascher Brothers Company, Inc.	Paint	\$ 101,978.42	\$ 84,284.65	\$ 17,693.77	\$ -
Commercial Specialties, Inc.	Toilet Accessories Install	\$ 26,808.00	\$ 22,574.83	\$ 4,233.16	\$ -
Construction Specialties	Wall Protection	\$ 87,110.00	\$ 83,754.60	\$ 3,355.40	\$ -
Herman Miller for Healthcare	Medical Equipment	\$ 142,538.80	\$ 142,538.80	\$ -	\$ -
Anderson Elevator Company	Elevators	\$ 2,619,247.78	\$ 2,484,682.87	\$ 134,564.91	\$ -
United States Fire Protection	Fire Protection	\$ 142,828.00	\$ 136,171.01	\$ 6,656.99	\$ -
Swisslog Healthcare	Pneumatic Tube	\$ 84,479.00	\$ 48,380.60	\$ 36,098.40	\$ -
Interstate Electronics Company	Nurse Call System	\$ 144,682.48	\$ 138,213.28	\$ 6,469.20	\$ -
Mosco, Inc.	Morgue Equipment	\$ 238,765.82	\$ 225,851.11	\$ 12,914.71	\$ -
TOTAL LABOR AND MATERIAL INCLUDING FEES* TO COMPLETE		\$ 10,687,488.93	\$ 8,804,805.85	\$ 1,882,683.08	\$ (0.00)

## Attachment 2

00 60 00 - Standard Contract Administration Forms (Multiple)

University of Illinois

DATE: 08/25/2017

Banner Doc #

Address Sequence:

**PAYMENT APPLICATION: PART 1A - PAYMENT CERTIFICATE for**  
Assigned Subcontractor

Address Code:

Check Print Location:

1099? Y N

Encl? Y N

OBFS Approval:

PROJECT NAME: 949-C12029 UIMC Interior

PROJECT #: (#949-C12029)

Renovations and Mechanical Upgrades

APPLICANT NAME &amp; ADDRESS: Kroeschell Engineering Co., Inc

3222 North Kennicott Ave, Arlington Heights, IL 60004

CONTRACT DIVISION: Division 02 - Plumbing Work

VENDOR REFERENCE:

ENCUMBRANCE #E0015309

APPLICATION #: 023

FINAL PAYMENT? N

PAY PERIOD: 04/16/2015 TO 02/28/2017

BANNER VENDOR NUMBER:

**1.0 CONTRACTOR'S TOTAL CONSTRUCTION CONTRACT SUM**

AND ALL CHANGE ORDERS (total of attached SWC)

(N/A to Assigned Subcontractor's Payment Application)

**2.0 CURRENT CONTRACT/AGREEMENT AMOUNT**

2.1 Applicant's Accepted Base Bid and Alternates:

\$989,180.00

2.2 Authorized Change Orders for Applicant's Added Work:

+ \$184,496.12

2.3 Authorized Change Orders for Applicant's Deleted Work:

- \$35,603.50

2.4 TOTAL (2.1 through 2.3)

\$1,138,052.62

**3.0 CURRENT PAYMENT DUE**

3.1 Total Value of Applicant's Work Completed to Date

\$1,138,052.62

3.2 Less 0% retained (round to nearest dollar):

- \$0.00

3.3 Less Payments Previously Certified

- \$1,101,448.62

3.4 Current Payment Due to Applicant

\$36,604.00

**4.1 Assigned Subcontractor's Certification**

I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By Louisa Gelab1 Date 03/09/2017  
Authorized Representative

**4.2 Contractor's Approval**Contractor: Michael Construction, Inc.

I agree that the Assigned Subcontractor's progress and performance to date on this project is satisfactory and approve payment of the certified amount.

IF CONTRACTOR'S PAY APPLICATION: I also certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By Brian Mote Date 03/09/2017  
Authorized Representative

**4.3 Professional Services Consultant's Certification**

PSC

Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By Steve Wall Date 03/13/2017  
Authorized Representative


**4.4 Owner's Representative's Approval \***

University of Illinois-construction unit responsible for the named project approve payment of the amount certified above.

By Pamela Hill Date 03/15/2017  
Authorized Representative

\* Certification only required for Contractor's Payment Application

CFOAPAL (* required fields)								
Chart *	Fund *	Organization *	Account *	Program *	Activity	Location	SEQ #	\$
2	710297	467001	173401	198000		200949		\$36,604.00

<b>AUTHORIZED DEPARTMENT APPROVAL</b>		<b>FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES</b>		<b>SORT</b>
 <p>WE, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.</p>				
<p>AUTHORIZED CERTIFIER</p>				
		CHAIRPERSON, BOARD OF TRUSTEES		

Distribution ☐ University of Illinois construction unit responsible for the named project ☐ Professional Services Consultant ☐ Contractor ☐ Applicant

\* Form approved by Legal Counsel - UOCP&RES  
06/13

00 60 00.4  
Multiple



00 60 00 - Standard Contract Administration Forms (Multiple)

University of Illinois

DATE: 08/25/2017

Banner Doc #

Address Sequence:

**PAYMENT APPLICATION: PART IA - PAYMENT CERTIFICATE for**  
Contractor With Assigned Subcontractors

Address Code:  
Check Print Location  
1099? Y N  
Encl? Y N  
OBFS Approval:

**PROJECT NAME:** 949-C12029 UIMC Interior  
Renovations and Mechanical Upgrades

**PROJECT #:** (#949-C12029)

**APPLICANT NAME & ADDRESS:** Michuda Construction, Inc.  
11204 S. Western Ave., Chicago, IL 60643

**CONTRACT DIVISION:** Division 01 - General Work**VENDOR REFERENCE:****ENCUMBRANCE #**E0015304**APPLICATION #:** 023**FINAL PAYMENT?** N**PAY PERIOD:** 09/29/2015 TO 02/28/2017**BANNER VENDOR NUMBER:**

<b>1.0 CONTRACTOR'S TOTAL CONSTRUCTION CONTRACT SUM</b>	\$22,647,390.79
<b>AND ALL CHANGE ORDERS (total of attached SVC)</b>	
(N/A to Assigned Subcontractor's Payment Application)	
<b>2.0 CURRENT CONTRACT/AGREEMENT AMOUNT</b>	
2.1 Applicant's Accepted Base Bid and Alternates:	\$8,716,744.00
2.2 Authorized Change Orders for Applicant's Added Work:	+ \$2,096,878.85
2.3 Authorized Change Orders for Applicant's Deleted Work:	- \$253,895.53
<b>2.4 TOTAL (2.1 through 2.3)</b>	<b>\$10,559,727.32</b>
<b>3.0 CURRENT PAYMENT DUE</b>	
3.1 Total Value of Applicant's Work Completed to Date	\$10,567,455.93
3.2 Less 0% retained (round to nearest dollar):	- \$0.00
3.3 Less Payments Previously Certified	- \$9,904,805.85
<b>3.4 Current Payment Due to Applicant</b>	<b>\$662,650.08</b>

**4.1 Assigned Subcontractor's Certification**

I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By \_\_\_\_\_ Date \_\_\_\_\_  
Authorized Representative

**4.2 Contractor's Approval**

Contractor Michuda Construction Inc.  
I agree that the Assigned Subcontractor's progress and performance to date on this project is satisfactory and approve payment of the certified amount.

IF CONTRACTOR'S PAY APPLICATION: I also certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By Dean Mota Date 03/09/2017  
Authorized Representative

**4.3 Professional Services Consultant's Certification**

PSC  
Based on the contract documents, my own observations of the progress of the work, and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By Steve Wini Date 03/13/2017  
Authorized Representative


**4.4 Owner's Representative's Approval \***

University of Illinois-construction unit responsible for the named project approve payment of the amount certified above.

By Pamela Hill Date 03/15/2017  
Authorized Representative

\* Certification only required for Contractor's Payment Application

CFOAPAL (* required fields)								
Chen *	Fund *	Organization *	Account *	Program *	Activity	Location	SEQ #	\$
2	710297	467001	173201	199000		200949		\$662,650.08

	I, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.	<b>FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES</b>	<b>SORT</b>
	<b>AUTHORIZED CERTIFIER</b>	<b>CHAIRPERSON, BOARD OF TRUSTEES</b>	

Distribution: ☐ University of Illinois construction unit responsible for the named project ☐ Professional Services Consultant ☐ Contractor ☐ Applicant

Form approved by Legal Counsel - UOCP&RES  
03/13

00 60 00-4  
Multiple

## FINAL WAIVER OF LIEN

STATE OF ILLINOIS

COUNTY OF COOK

City #

Loan #

WHEREAS the undersigned has been employed by

University of Illinois Medical Center

to furnish

General Construction Work

for the premises known as

Interior Renovation and Mechanical Upgrade

of which

University of Illinois Medical Center

is the owner

The undersigned, for and in consideration of

Nine Hundred Ninety-Two Thousand Six Hundred Fifty Dollars and 0/100

\$ 862,850.08 Dollars and other good and valuable considerations, the receipt whereof is hereby acknowledged, do 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, heretofore furnished, or which maybe furnished at anytime hereafter by the undersigned for the above described premises, INCLUDING EXTRAS. The undersigned also waives and releases any claim or right to claim against any surety bond for payment of such labor, material, fixtures, apparatus or machinery.

DATE

2/6/2017

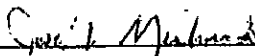
COMPANY NAME

Michuda Construction, Inc.

18105 West Creek Drive, Suite 1A

Tinley Park, IL 60477

SIGNATURE AND TITLE



Executive Vice President

## CONTRACTOR'S AFFIDAVIT

STATE OF ILLINOIS

COUNTY OF COOK

TO WHOM IT MAY CONCERN:

THE UNDERSIGNED, (NAME)

Joseph A. Jankowski

BEING DULY SWORN,

DEPOSES AND SAYS THAT HE OR SHE IS (POSITION)

Executive Vice President

OF THE (COMPANY)

Michuda Construction, Inc.

WHO IS THE CONTRACTOR FOR THE

WORK ON THE BUILDING

LOCATED AT

1748 W. Taylor Street, Chicago, IL 60612

OWNED BY

University of Illinois Medical Center

That the total amount of the contract including extras is \$

10,687,466.83

on which he/she has received payment

\$ 3,984,806.85, prior to this. 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
Michuda Construction Inc.	General Contractor	\$ 10,687,466.83	\$ 3,984,806.85	\$ 662,850.08	\$ (0.00)
(See Attachment for Sub Breakdown)					
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS TO COMPLETE		\$ 10,687,466.83	\$ 3,984,806.85	\$ 662,850.08	\$ (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.

Signed this

06

day of

February 2017

Signature:



Executive Vice President

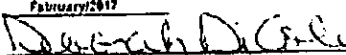
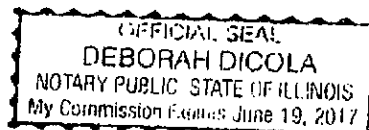
Subscribed and sworn to before me this

06

day of

February 2017

Notary Public

## 00 60 00 - Standard Contract Administration Forms (Multiple)

University of Illinois

DATE: 09/12/2017

Banner Doc #

Address Sequence:

**PAYMENT APPLICATION: PART IA - PAYMENT CERTIFICATE for**  
Contractor With Assigned Subcontractors

Address Code:

Check Print Location:

1099? Y N

End? Y N

OBFS Approval:

**PROJECT NAME:** 949-C16053 - Hybrid Operating**PROJECT #:** (#949-C16053)

Room Suite

**APPLICANT NAME & ADDRESS:** International Quality Contracting Inc

24225 S Volbrecht Road, Crete, IL 60417

**CONTRACT DIVISION:** Division 01 - General Work**VENDOR REFERENCE:****ENCUMBRANCE #**E0019079**APPLICATION #:** 006**FINAL PAYMENT?** N**PAY PERIOD:** 05/01/2017 TO 08/26/2017**BANNER VENDOR NUMBER:**

<b>1.0 CONTRACTOR'S TOTAL CONSTRUCTION CONTRACT SUM</b>	\$1,288,624.95
<b>AND ALL CHANGE ORDERS (total of attached SWC)</b>	
<i>(N/A to Assigned Subcontractor's Payment Application)</i>	
<b>2.0 CURRENT CONTRACT/AGREEMENT AMOUNT</b>	
2.1 Applicant's Accepted Base Bid and Alternates:	\$465,825.00
2.2 Authorized Change Orders for Applicant's Added Work:	\$78,355.24
2.3 Authorized Change Orders for Applicant's Deleted Work:	\$18,900.00
<b>2.4 TOTAL (2.1 through 2.3)</b>	<b>\$525,280.24</b>
<b>3.0 CURRENT PAYMENT DUE</b>	
3.1 Total Value of Applicant's Work Completed to Date	\$525,280.24
3.2 Less 0% retained (round to nearest dollar):	\$0.00
3.3 Less Payments Previously Certified	\$391,969.81
<b>3.4 Current Payment Due to Applicant</b>	<b>\$133,310.43</b>

**4.1 Assigned Subcontractor's Certification**

I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By: \_\_\_\_\_ Date: \_\_\_\_\_  
Authorized Representative

**4.2 Contractor's Approval**Contractor: International Quality Contracting Inc

I agree that the Assigned Subcontractor's progress and performance to date on this project is satisfactory and approve payment of the certified amount.

IF CONTRACTOR'S PAY APPLICATION: I also certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By: Sarah Burroughs Date 08/31/2017  
Authorized Representative

**4.3 Professional Services Consultant's Certification \***

PSC: \_\_\_\_\_  
Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By: Jason Crowl Date 08/01/2017  
Authorized Representative


\* Certification only required for Contractor's Payment Application

**4.4 Owner's Representative's Approval \***

University of Illinois-construction unit responsible for the named project approve payment of the amount certified above.

By: Parvata Hill Date 08/01/2017  
Authorized Representative

CFOAPAL (* required fields)							
Chart *	Fund *	Organization *	Account *	Program *	Activity	Location	SEO # S
2	710297	457001	173201	198000		200949	\$133,310.43

	WE, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.	FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES	SORT
		CHAIRPERSON, BOARD OF TRUSTEES	
		SECRETARY, BOARD OF TRUSTEES	
<p align="center">_____ AUTHORIZED CERTIFIER</p>			

Distribution: ☐ University of Illinois construction unit responsible for the named project ☐ Professional Services Consultant ☐ Contractor ☐ Applicant

Form approved by Legal Counsel - UOCP&RES  
07/17

## FINAL WAIVER OF LIEN

STATE OF Illinois ) SS  
COUNTY OF Will

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

TO WHOM IT MAY CONCERN

WHEREAS the undersigned has been employed by The Board of Trustees of the University of Illinois  
to furnish Division 01-General Work  
for the premises known as UIH Hybrid Operating Room Suite, Project 949-C16053  
of which The Board of Trustees of the University of Illinois is the owner  
THE undersigned, for and in consideration of One hundred thirty-three thousand three hundred ten and 43/100  
\$133,310.43 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 8/31/17 COMPANY NAME International Quality Contracting, Inc.  
ADDRESS 24225 S Veilbrecht Road, Crete, IL 60417  
SIGNATURE AND TITLE Valerie Porsenaire Treasurer

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

## CONTRACTOR'S AFFIDAVIT

STATE OF Illinois ) SS  
COUNTY OF Will

TO WHOM IT MAY CONCERN

THE UNDERSIGNED, Valerie Porsenaire BEING DULY SWORN DEPOSES  
AND SAYS THAT HE OR SHE IS Treasurer OF  
International Quality Contracting, Inc. WHO IS THE CONTRACTOR FOR THE  
Division 01-General Work WORK ON THE BUILDING LOCATED AT  
UIH Hybrid Operating Room Suite, Project 949-C16053 OWNED BY  
The Board of Trustees of the University of Illinois

That the total amount of the contract including extras\* is \$525,280.24 on which he or she has received payment of  
\$391,969.81 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 & Addresses	What For	Contract Price Including Extras *	Amount Paid	This Payment	Balance Due
International Quality Contracting, Inc.	General Contracting	\$389,955.74	\$285,285.51	\$104,669.23	\$0.00
Spreviari's Custom Counters	Cerian	\$32,739.00	\$25,398.50	\$4,340.50	\$0.00
Accurate Radiation Shielding	Lead drywall & glass	\$23,986.00	\$21,158.00	\$2,035.00	\$0.00
Alert Fire Protection	Fire Sprinklers	\$9,000.00	\$5,480.00	\$600.00	\$0.00
Jack Waters Plumbing	Plumbing	\$66,100.50	\$47,692.00	\$20,487.70	\$0.00
Colvin Masonry Co.	Masonry	\$4,500.00	\$4,050.00	\$450.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
TOTAL LABOR AND MATERIAL INCLUDING EXTRAS* TO COMPLETE		\$525,280.24	\$391,969.81	\$133,310.43	\$0.00

All labor and things fully paid. All material taken from fully paid stock and delivered to jobsite in company owned vehicle.

No outside rental equipment used.

Our Principal Supplier(s) are:

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 8-31-17 Signature Valerie PorsenaireSUBSCRIBED AND SWORN TO BEFORE ME THIS 31<sup>st</sup> DAY OF August, 2017

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

Notary Public

OFFICIAL SEAL  
LORAL RUGARH  
NOTARY PUBLIC STATE OF ILLINOIS

STATE OF Illinois ) SS  
COUNTY OF DePue

Escrow#

TO WHOM IT MAY CONCERN,

WHEREAS the undersigned has been employed by International Quality Contracting, Inc.  
to furnish Cerian wall coverings, counters  
for the premises known as UIH Hybrid Operating Room Suite, Project 849-C16053  
of which The Board of Trustees of the University of Illinois is the owner  
THAT undersigned, for and in consideration of Four thousand three hundred forty-eight and 50/100  
\$4,348.50 Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, (date) 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 8/10/17 COMPANY NAME Sproveri's Custom Counters  
ADDRESS 66 Laura Drive, Addison, IL 60101

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 ) SS  
COUNTY OF DEPAUL

TO WHOM IT MAY CONCERN

THE UNDERSIGNED, Douglas Bickel BEING DULY SWORN, DEPOSES  
AND SAYS THAT HE OR SHE IS OFF OF

Sprovier's Custom Counters	WHO IS THE CONTRACTOR FOR THE
Cortan wall coverings, counters	WORK ON THE BUILDING LOCATED AT
UHM Hybrid Operating Room Suite, Project 949-C18853	OWNED BY
The Board of Trustees of the University Of Illinois	

That the total amount of the contract including extras is \$32,739.00 on which he or she has received payment of 28,388.10 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

[illegible]

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 8/10/17 Signature [Signature]

SUBSCRIBED AND SWORN TO BEFORE ME THIS 10<sup>th</sup> DAY OF August, 2017

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

**Notary Public**

### FINAL WAIVER OF LIEN

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ ) SS \_\_\_\_\_ Esquire

TO WHOM IT MAY CONCERN

WHEREAS the undersigned has been employed by International Quality Contracting, Inc.  
to furnish Lead Shielding  
for the premises known as UIN Hybrid Operating Room Suite, Project 949-C16033  
of which The Board of Trustees of the University of Illinois is the owner;

THE UNDERSIGNED, for and in consideration of Two thousand eight hundred thirty-five and 00/100  
\$2,835.00 Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, dates) 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 in 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 in the above-described premises, INCLUDING EXTRAS \*

DATE 08/16/77 COMPANY NAME Accurate Radiation Shielding, Inc.  
ADDRESS 206 Cleveland Street, Cary, IL 60013  
SIGNATURE AND TITLE  President  
\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANCE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

### CONTRACTOR'S AFFIDAVIT

STATE OF Illinois ) SS  
COUNTY OF \_\_\_\_\_  
TO WHOM IT MAY CONCERN  
THE UNDERSIGNED \_\_\_\_\_ **Blake Denker** \_\_\_\_\_ BEING DULY SWORN, DEPOSES  
AND SAYS THAT HE OR SHE IS \_\_\_\_\_ **President** \_\_\_\_\_ OF  
\_\_\_\_\_ **Ancurite Radiation Shielding, Inc.** \_\_\_\_\_ WHO IS THE CONTRACTOR FOR THE  
\_\_\_\_\_ **Shielding** \_\_\_\_\_ WORK ON THE BUILDING LOCATED AT  
\_\_\_\_\_ **UIH Hybrid Operating Room Suite, Project 949-C18853** \_\_\_\_\_ OWNED BY  
\_\_\_\_\_  
**The Board of Trustees of the University of Illinois**

That the total amount of the contract including extras is \$23,955.00 on which he or she has received payment of 21,158.00 prior to this payment. That all waivers are true, correct and genuine and delivered unmodified orally 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 in each, and that the items mentioned include all labor and material required to complete said work according to plans and specifications.

[illegible]

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 8/16/2017 Signature [Signature]

SUBSCRIBED AND SWORN TO BEFORE ME THIS 16th DAY OF August, 2017

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

"OFFICIAL SEAL"  
JOSEPH F PESCE  
Notary Public, State of Illinois  
My Commission Expires 4/19/2020

### FINAL WAIVER OF LIEN

STATE OF Illinois ) SS  
COUNTY OF COOK

## Escrow

TO WHOM IT MAY CONCERN

WHEREAS the undersigned has been employed by International Quality Contracting, Inc.  
to furnish Sprinklers  
for the premises known as UIH Hybrid Operating Room Suite, Project #49-C18053  
of which The Board of Trustees of the University of Illinois is the owner

THE undersigned, for and in consideration of Six hundred dollars and 00/100  
\$608.88 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 8/9/79

COMPANY NAME

### Alert Fire Protection

ADDRESS

8848 W 192nd Street1, Unit O, Mokena, IL 60448

**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 ) SS  
COUNTY OF COOK

TO WHOM IT MAY CONCERN

THE UNOERSIGNED,  
AND SAYS THAT HE OR SHE IS

AUGUST DREWS  
PRESIDENT

BEING DULY SWORN, DEPOSES  
DE

## Alert Fire Protection

WHO IS THE CONTRACTOR FOR THE

## Sprinkler

WORK ON THE BUILDING LOCATED AT

Ull Hybrid Operating Room Suite, Project #49-C18853

OWNED BY

The Board of Trustees of the University Of Illinois

That the total amount of the contract including extras is \$6,880.80 on which he or she has received payment of \$4,400.00 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.

[illegible]

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.

○減価

**Signature**

SUBSCRIBED AND SWORN TO BEFORE ME THIS

9<sup>th</sup> DAY OF August

Not my Public

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

NOTARY PUBLIC OFFICIAL SEAL  
SANDRA J JOHNSON  
NOTARY PUBLIC - STATE OF ILLINOIS  
MY COMMISSION EXPIRES 02/04/21

### FINAL WAIVER OF LIEN

STATE OF Illinois ) SS  
COUNTY OF COOK

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

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by International Quality Contracting, Inc.  
to furnish Plumbing  
for the premises known as UIM Hybrid Operating Room Suite, Project 849-C16053  
of which The Board of Trustees of the University of Illinois is the owner  
THE undersigned, "or and in consideration of Twenty thousand four hundred seven and 70/100  
\$20,407.70 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 8/11/2017 COMPANY NAME Jack Waters Plumbing, Inc.  
ADDRESS 448 West 194th Street, Glenwood, IL 60425  
SIGNATURE AND TITLE Jeffrey J. Waters President  
\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

### CONTRACTOR'S AFFIDAVIT

STATE OF Illinois SS  
COUNTY OF \_\_\_\_\_

TO WHOM IT MAY CONCERN.

THE UNDERSIGNED, Stephanie L. Sims-Ozment BEING DULY SWORN, DEPOSES  
AND SAYS THAT HE OR SHE IS President OF  
Jack Waters Plumbing, Inc. WHO IS THE CONTRACTOR FOR THE  
Plumbing WORK ON THE BUILDING LOCATED AT  
UIH Hybrid Operating Room Suite, Project 949-C16853 OWNED BY  
The Board of Trustees of the University Of Illinois

That the total amount of the contract including extras is \$68,100.50 on which he or she has received payment of 47,692.38 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 & Addresses	What For	Contract Price Including Extras *	Amount Paid	This Payment	Balance Due
Jack Waters Plumbing, Inc.	Plumbing	\$68,180.50	\$47,692.80	\$20,407.70	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.86	\$0.08	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00
		\$0.08	\$0.08	\$0.00	\$0.00
		\$0.08	\$0.00	\$0.00	\$0.00
		\$0.08	\$0.00	\$0.00	\$0.00
		\$8.00	\$0.00	\$0.00	\$0.00
		\$0.80	\$0.00	\$0.00	\$0.00
		\$0.00	\$0.00	\$0.00	\$0.00

All labor and fringes fully paid. All material taken from fully paid stock and delivered to jobsite in company owned vehicle.  
No outside rental equipment used.  
Our Principal Supplier(s) are:

TOTAL LABOR AND MATERIAL INCLUDING EXTRAS* TO COMPLETE	\$68,180.50	\$47,692.08	\$20,407.70	\$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 8/11/2017 Signature [Signature]  
SUBSCRIBED AND SWORN TO BEFORE ME THIS 1<sup>st</sup> DAY OF AUGUST 2817

\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH **OFFICIAL SEAL** TO THE CONTRACT

**BENJAMIN CLARK SIMS**  
NOTARY PUBLIC - STATE OF ILLINOIS  
My Commission Expires March 7, 2021



### FINAL WAIVER OF LIEN

STATE OF Indiana ) SS.  
COUNTY OF LAKE

**Escrow#**

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by International Quality Contracting, Inc.  
to furnish Open masonry wall, Access panel  
for the premises known as UIN Hybrid Operating Room Suite, Project 949-C18053  
of which The Board of Trustees of the University of Illinois is the owner.

THE undersigned, for and in consideration of Four hundred fifty dollars and 00/100  
\$450.00 Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged, (does) 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 8/16/17 COMPANY NAME Colvin Masonry Co.  
ADDRESS 10650 Threlton Street, St. John, IN 46373  
SIGNATURE AND TITLE Jeffrey A. Colvin President  
\*EXTRAS INCLUDE BUT ARE NOT LIMITED TO CHANGE ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT.

### CONTRACTOR'S AFFIDAVIT

STATE OF Indiana ) SS.  
COUNTY OF LAKE

TO WHOM IT MAY CONCERN:

THE UNDERSIGNED, JEFFREY A. COLVIN BEING DULY SWORN, DEPOSES  
AND SAYS THAT HE OR SHE IS PRESIDENT OF

Colvin Masonry Co. WHO IS THE CONTRACTOR FOR THE  
Open masonry wall, add access panel WORK ON THE BUILDING LOCATED AT  
UIN Hybrid Operating Room Suite, Project 949-C16053 OWNED BY  
The Board of Trustees of the University of Illinois

That the total amount of the contract including extras" is \$4,500.00 on which he or she has received payment of 4,050.00 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.

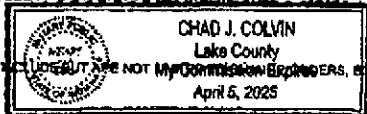
[illegible]

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 8/6/17 Signature [Signature]

SUBSCRIBED AND SWORN TO BEFORE ME THIS 10<sup>th</sup> DAY OF August 2012 1

\*EXTRAS NOT LOANED OUT ARE NOT IN CONTINUATION OF ORDERS, BOTH ORAL AND WRITTEN, TO THE CONTRACT



00 60 00 - Standard Contract Administration Forms (Multiple)

University of Illinois

DATE: 09/12/2017

Banner Doc #

Address Sequence:

**PAYMENT APPLICATION: PART IA - PAYMENT CERTIFICATE for**  
Assigned Subcontractor

Address Code:

Check Print Location:

1099? Y N

End? Y N

OBFS Approval:

**PROJECT NAME:** 949-C16053 - Hybrid Operating Room Suite**PROJECT #:** (#949-C16053)**APPLICANT NAME & ADDRESS:** Amber Mechanical Contractors inc.  
11950 S. Central Ave., Alsip, IL 60803**CONTRACT DIVISION:** Division 03 - Heating, Piping, Refrigeration, and Temperature Control Work**VENDOR REFERENCE:****ENCUMBRANCE #**E0019080**APPLICATION #:** 006**FINAL PAYMENT?** N**PAY PERIOD:** 08/01/2017 TO 08/31/2017**BANNER VENDOR NUMBER:****1.0 CONTRACTOR'S TOTAL CONSTRUCTION CONTRACT SUM****AND ALL CHANGE ORDERS (total of attached SWC)**

(N/A to Assigned Subcontractor's Payment Application)

**2.0 CURRENT CONTRACT/AGREEMENT AMOUNT**

2.1 Applicant's Accepted Base Bid and Alternates: \$285,000.00

2.2 Authorized Change Orders for Applicant's Added Work: + \$110,019.17

2.3 Authorized Change Orders for Applicant's Deleted Work: - \$3,683.44

2.4 TOTAL (2.1 through 2.3) \$391,335.73

**3.0 CURRENT PAYMENT DUE**

3.1 Total Value of Applicant's Work Completed to Date \$391,335.73

3.2 Less 0% retained (round to nearest dollar): - \$39,134.00

3.3 Less Payments Previously Certified - \$247,774.86

3.4 Current Payment Due to Applicant \$104,426.87

**4.1 Assigned Subcontractor's Certification**

I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By: David Keenan Date 08/30/2017

Authorized Representative

**4.2 Contractor's Approval**

Contractor: International Quality Contracting, Inc.

I agree that the Assigned Subcontractor's progress and performance to date on this project is satisfactory and approve payment of the certified amount.

IF CONTRACTOR'S PAY APPLICATION: I also certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By: Sarah Binns Date 08/30/2017

Authorized Representative

**4.3 Professional Services Consultant's Certification**

PSC:

Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By: Jason Crowl Date 09/01/2017

Authorized Representative

**4.4 Owner's Representative's Approval \***


University of Illinois-construction unit responsible for the named project approve payment of the amount certified above.

By: Pamela Hill Date 09/01/2017

Authorized Representative

\* Certification only required for Contractor's Payment Application

CFCAPAL (* required fields)							
Chart *	Fund *	Organization *	Account *	Program *	Activity	Location	SEQ # \$
2	710297	457001	173402	198000		200949	\$104,426.87

	<b>AUTHORIZED DEPARTMENT APPROVAL</b> WE, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.	<b>FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES</b>	<b>SORT</b>
		CHAIRPERSON, BOARD OF TRUSTEES	
	AUTHORIZED CERTIFIER	SECRETARY, BOARD OF TRUSTEES	

 Distribution: ☐ University of Illinois construction unit responsible for the named project ☐ Professional Services Consultant ☐ Contractor ☐ Applicant

 Form approved by Legal Counsel - UOCP&RES  
 07/17

**University of Illinois at Chicago**  
**FINAL WAIVER OF LIEN**

STATE OF ILLINOIS  
COUNTY OF COOK }

SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOISto furnish DIVISION 03 - HEATING, PIPING, REFRIGERATION, & TEMPERATURE CONTROL WORKfor the project known as UIC HYBRID OPERATING ROOM SUITE, PROJECT #949-C16053of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

is the owner.

THE undersigned, for all in consideration of ONE HUNDRED FORTY THREE THOUSAND FIVE HUNDRED FIFTY NINE & 87/100  
\$143,559.87 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 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

31<sup>st</sup>

day of

August20 17COMPANY NAME AMBER MECHANICAL CONTRACTORS, INC.

Signature and Seal:

NOTE: All waivers must be for the full amount paid. If the 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 }

SS

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he is WILLIAM J. BEUKEMA, JR.  
CO-PRESIDENT of the AMBER MECHANICAL CONTRACTORS, INC.

who is the contractor for the project known as UIC HYBRID OPERATING ROOM SUITE, PROJECT #949-C16053 of whichTHE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

is the owner.

That the total amount of the contract including extras is \$391,335.73 on which he has received payment of  
\$247,775.76

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:

SUBCONTRACTOR NAME	SUBCONTRACTOR FEIN	DIVISION OF WORK	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Amber Mechanical Contractors, Inc.	36-2893038	03-HEATING	\$215,609.85	\$116,335.21	\$99,274.64	\$0.00
Automatic Building Controls, Inc.	80-0643331	03-HEATING	\$113,025.88	\$69,963.30	\$43,062.58	\$0.00
Dekayo Corporation	20-8831881	03-HEATING	\$31,350.00	\$30,127.35	\$1,222.65	\$0.00
Hillco Distributing	36-2893038	03-HEATING	\$31,350.00	\$31,350.00	\$0.00	\$0.00
TOTAL LABOR AND MATERIAL COMPLETED			\$391,335.73	\$247,775.86	\$143,559.87	\$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.

Signed this

31<sup>st</sup>

day of

August20 17

Signature:

Subscribed and sworn to before me this

31<sup>st</sup>

day of

August20 17

9/00

Norma J. Chanis8/24/2018

NOTARY SEAL  
Norma J. Chanis  
Notary Public, State of Illinois  
My Commission Expires 8/24/2018

Page 1 of 1

00 60 00 - Standard Contract Administration Forms (Multiple)

Attachment 2

University of Illinois  
CONTRACTOR'S FINAL RELEASE AND WAIVER OF LIEN

Project

Contractor

Name: 949-C16053 - Hybrid Operating Room Suite (#949-C16053)

Name: Amber Mechanical Contractors Inc.

Address: \_\_\_\_\_

Address: 11950 S. Central Ave.  
Alsip / IL / 60803

Owner: The Board of Trustees of the University of Illinois

Contract Division: Division 03 - Heating, Piping, Refrigeration, and Temperature Control Work  
Contract Date: 07/12/2016

**TO ALL WHOM IT MAY CONCERN:**

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned Contractor hereby waives, discharges, and releases any and all liens, claims, and rights to liens against the above-mentioned project, and any and all other property owned by or the title to which is in the name of the above-referenced Owner and against any and all funds of the Owner or the State of Illinois appropriated or available for the construction of said project, and any and all warrants drawn upon or issued against any such funds or monies, which the undersigned Contractor may have or may hereafter acquire or possess as a result of the furnishing of labor, materials, and/or equipment, and the performance of Work by the Contractor on or in connection with said project, whether under and pursuant to the above-mentioned contract between the Contractor and the Owner pertaining to said project or otherwise, and which said liens, claims or rights of lien may arise and exist under and by virtue of an act of the General Assembly of the State of Illinois entitled, "Mechanics Lien Act", as amended.

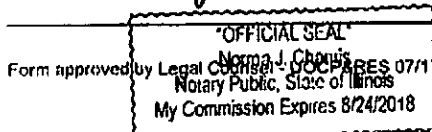
The undersigned further hereby acknowledges that the sum of One Hundred Forty Three Thousand Five Hundred Sixty And 87/100 Dollars (\$143,560.87), constitutes the entire **unpaid** balance due the undersigned in connection with said project whether under said contract or otherwise and that the payment of said sum to the Contractor will constitute payment in full and will fully satisfy any and all liens, claims, and demands which the Contractor may have or assert against the Owner and/or the State of Illinois in connection with said contract or project.

Dated this 31<sup>st</sup> day of August 20 17  
Amber Mechanical Contractors Inc.  
Contractor

Witness to Signature:

Norma J. Chavis

By: \_\_\_\_\_  
Title: Co-President



**University of Illinois at Chicago**  
**FINAL WAIVER OF LIEN**

STATE OF ILLINOIS }  
 COUNTY OF COOK } SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

to furnish DIVISION 03 - HEATING, PIPING, REFRIGERATION, & TEMPERATURE CONTROL WORK

for the project known as UIC HYBRID OPERATING ROOM SUITE, PROJECT #949-C16053

of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner.

THE undersigned, for all in consideration of FORTY THREE THOUSAND SIXTY TWO & 58/100

\$43,062.58 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 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

31 day of August, 2017

COMPANY NAME AUTOMATIC BUILDING CONTROLS, LLC

Signature and Seal

NOTE: All waivers must be for the full amount paid. If the 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 } SS

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he is Tudith Bevil

General Secretary

of the AUTOMATIC BUILDING CONTROLS, LLC

who is the contractor for the project known as UIC HYBRID OPERATING ROOM SUITE, PROJECT #949-C16053 of which  
THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner.

That the total amount of the contract including extras is \$113,025.88 on which he has received payment of  
\$69,963.30

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:

SUBCONTRACTOR NAME	SUBCONTRACTOR FEIN	DIVISION OF WORK	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Automatic Building Controls, LLC	80-0643331	03-HEATING	\$113,025.88	\$69,963.30	\$43,062.58	\$0.00
TOTAL LABOR AND MATERIAL COMPLETED			\$113,025.88	\$69,963.30	\$43,062.58	\$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.

Signed this 31 day of August, 2017

Signature: \_\_\_\_\_

Subscribed and sworn to before me this 31 day of August, 2017

9/00



SARAH E. HURNER  
 OFFICIAL SEAL  
 Notary Public, State of Illinois  
 My Commission Expires  
 January 19, 2018

Page 1 of 1

00 60 00 - Standard Contract Administration Forms (Multiple)

**University of Illinois  
FINAL RELEASE AND WAIVER OF LIEN FOR  
SUBCONTRACTORS/VENDORS/SUPPLIERS**

<u>SubContractor/Vendor/Supplier</u>	<u>Project</u>	<u>Contractor</u>
Name: <u>Automatic Building Controls, LLC</u>	Name: <u>949-C16053 - Hybrid Operating Room Suite (#949-C16053)</u>	Name: <u>Amber Mechanical Contractors Inc.</u>
Address: <u>3315 Algonquin Road Rolling Meadows / IL / 60008</u>	Address:	Address: <u>11950 S. Central Ave. Alsip / IL / 60803</u>
Work Done: <u>Temperature Control Labor &amp; Materials</u>	Owner: <u>The Board of Trustees of the University of Illinois</u>	Contract Division: <u>Division 03 - Heating, Piping, Refrigeration, and Temperature Control Work</u>
Subcontract/PO#: <u>203329</u>		Contract Date: <u>07/12/2016</u>

**TO ALL WHOM IT MAY CONCERN:**

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned Subcontractor/Vendor/Supplier hereby waives, discharges and releases any and all liens, claims, and rights to liens against the above-mentioned project, against any and all other property owned by or the title to which is in the name of the above-referenced Owner, against any and all funds of the Owner or the State of Illinois appropriated or available for the construction of said project, and against any and all warrants drawn upon or issued against any such funds or monies, which the undersigned may have or may hereafter acquire or possess as a result of the furnishing by the Subcontractor/Vendor/Supplier of labor, materials, and/or equipment or the performance of work by the Subcontractor/Vendor/Supplier on or in connection with said project, whether under and pursuant to the subcontract between Subcontractor/Vendor/Supplier and the above-referenced Contractor pertaining to said project or otherwise, and which said liens, claims, or rights of lien may arise and exist under and by virtue of an act of the General Assembly of the State of Illinois entitled, "Mechanics Lien Act", as amended.

The undersigned Subcontractor/Vendor/Supplier acknowledges that it has no claim or demand of any nature or amount against the Owner for furnishing any labor, materials and/or equipment for, or the performance of any work upon said project, or for anything arising or occurring in connection with said project, whether under said contract between the undersigned and said Contractor or otherwise, and hereby fully and completely releases and discharges the Owner and/or the State of Illinois from any and all such claims.

Dated this 31 day of August, 2017

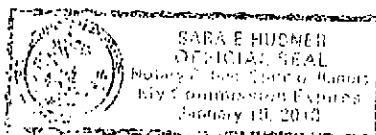
Automatic Building Controls, LLC  
Subcontractor/Vendor/Supplier

Witness to Signature:

\_\_\_\_\_  
\_\_\_\_\_

By: Judith FennellTitle: Corporate Secretary

Form approved by Legal Counsel - UOCP&amp;RES 07/17



} 53

of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLNOIS is the owner.

Given under Old hand Signed and seal and this  
18<sup>th</sup> day of July, 2017.

**Signature and Seal:**

### CONTRACTOR'S AFFIDAVIT

55

\$69,963.30 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:

SUBCONTRACTOR NAME	SUBCONTRACTOR FEIN	DIVISION OF WORK	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Dekayo Corporation	20-8831881	03-HEATING	\$31,350.00	\$30,127.35	\$1,222.65	\$0.00
TOTAL LABOR AND MATERIAL COMPLETED			\$31,350.00	\$30,127.35	\$1,222.65	\$0.00

Signed this 18<sup>th</sup> day of JULY 2017

**Signature:**

~~CHRISTINE J. ORTIZ~~

**Official Seal**  
Notary Public - State of Illinois  
My Commission Expires May 3, 2011

9/100

Page 1 of 1

00 60 00 - Standard Contract Administration Forms (Multiple)

**University of Illinois  
FINAL RELEASE AND WAIVER OF LIEN FOR  
SUBCONTRACTORS/VENDORS/SUPPLIERS**

<u>SubContractor/Vendor/Supplier</u>	<u>Project</u>	<u>Contractor</u>
Name: <u>Dekayo Corporation</u>	Name: <u>949-C16053 - Hybrid Operating Room Suite (#949-C16053)</u>	Name: <u>Amber Mechanical Contractors Inc.</u>
Address: <u>15425 S. Cherrywood Ct Orland Park / IL / 60462</u>	Address:	Address: <u>11950 S. Central Ave. Alsip / IL / 60803</u>
Work Done: <u>HVAC Labor</u>	Owner: <u>The Board of Trustees of the University of Illinois</u>	Contract Division: <u>Division 03 - Heating, Piping, Refrigeration, and Temperature Control Work</u>
Subcontract/PO#: <u>203330</u>		Contract Date: <u>07/12/2016</u>

**TO ALL WHOM IT MAY CONCERN:**

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned Subcontractor/Vendor/Supplier hereby waives, discharges and releases any and all liens, claims, and rights to liens against the above-mentioned project, against any and all other property owned by or the title to which is in the name of the above-referenced Owner, against any and all funds of the Owner or the State of Illinois appropriated or available for the construction of said project, and against any and all warrants drawn upon or issued against any such funds or monies, which the undersigned may have or may hereafter acquire or possess as a result of the furnishing by the Subcontractor/Vendor/Supplier of labor, materials, and/or equipment or the performance of Work by the Subcontractor/Vendor/Supplier on or in connection with said project, whether under and pursuant to the subcontract between Subcontractor/Vendor/Supplier and the above-referenced Contractor pertaining to said project or otherwise, and which said liens, claims, or rights of lien may arise and exist under and by virtue of an act of the General Assembly of the State of Illinois entitled, "Mechanics Lien Act", as amended.

The undersigned Subcontractor/Vendor/Supplier acknowledges that it has no claim or demand of any nature or amount against the Owner for furnishing any labor, materials and/or equipment for, or the performance of any work upon said project, or for anything arising or occurring in connection with said project, whether under said contract between the undersigned and said Contractor or otherwise, and hereby fully and completely releases and discharges the Owner and/or the State of Illinois from any and all such claims.

Dated this 18th day of July 20 17Dekayo Corporation

Subcontractor/Vendor/Supplier

Witness to Signature:


By: Darrell OrtizTitle: President

Form approved by Legal Counsel - UOCP&amp;RES 07/17





University of Illinois at Chicago  
**FINAL WAIVER OF LIEN**

STATE OF ILLINOIS  
COUNTY OF COOK } SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

to furnish DIVISION 03 - HEATING, PIPING, REFRIGERATION, & TEMPERATURE CONTROL WORK

for the project known as UIC HYBRID OPERATING ROOM SUITE, PROJECT #949-C16053

of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner

THE undersigned, for all in consideration of THIRTY ONE THOUSAND THREE HUNDRED FIFTY & 00/100  
\$31,350.00 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 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 MARCH, 20 17

COMPANY NAME HILLCO DISTRIBUTING

Signature and Seal: \_\_\_\_\_

NOTE: All waivers must be for the full amount paid. If the 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 } SS

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he is NICOLE LIDDY  
PRESIDENT of the HILLCO DISTRIBUTING  
who is the contractor for the project known as UIC HYBRID OPERATING ROOM SUITE, PROJECT #949-C16053 of which  
THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner  
That the total amount of the contract including extras is \$31,350.00 on which he 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 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:

SUBCONTRACTOR NAME	SUBCONTRACTOR FEIN	DIVISION OF WORK	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Hillco Distributing	36-2893038	03-HEATING	\$31,350.00	\$0.00	\$31,350.00	\$0.00
TOTAL LABOR AND MATERIAL COMPLETED			\$31,350.00	\$0.00	\$31,350.00	\$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

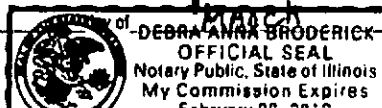
Signed this \_\_\_\_\_ day of MARCH, 20 17

Signature: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_

9:00

Debra Anna Broderick



University of Illinois  
FINAL RELEASE AND WAIVER OF LIEN FOR  
SUBCONTRACTORS/VENDORS/SUPPLIERS

<u>SubContractor/Vendor/Supplier</u>	<u>Project</u>	<u>Contractor</u>
Name: <u>Hilco Distributing</u>	Name: <u>949-C16053 - Hybrid Operating Room Suite (#949-C16053)</u>	Name: <u>Amber Mechanical Contractors Inc.</u>
Address: <u>1516 W Adams Chicago / IL / 60607</u>	Address:	Address: <u>11950 S. Central Ave. Alsip / IL / 60803</u>
Work Done: <u>HVAC Equipment</u>	Owner: <u>The Board of Trustees of the University of Illinois</u>	Contract Division: <u>Division 03 - Heating, Piping, Refrigeration, and Temperature Control Work</u>
Subcontract/PO#: <u>203331</u>		Contract Date: <u>07/12/2016</u>

**TO ALL WHOM IT MAY CONCERN:**

For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned Subcontractor/Vendor/Supplier hereby waives, discharges and releases any and all liens, claims, and rights to liens against the above-mentioned project, against any and all other property owned by or the title to which is in the name of the above-referenced Owner, against any and all funds of the Owner or the State of Illinois appropriated or available for the construction of said project, and against any and all warrants drawn upon or issued against any such funds or monies, which the undersigned may have or may hereafter acquire or possess as a result of the furnishing by the Subcontractor/Vendor/Supplier of labor, materials, and/or equipment or the performance of Work by the Subcontractor/Vendor/Supplier on or in connection with said project, whether under and pursuant to the subcontract between Subcontractor/Vendor/Supplier and the above-referenced Contractor pertaining to said project or otherwise, and which said liens, claims, or rights of lien may arise and exist under and by virtue of an act of the General Assembly of the State of Illinois entitled, "Mechanics Lien Act", as amended.

The undersigned Subcontractor/Vendor/Supplier acknowledges that it has no claim or demand of any nature or amount against the Owner for furnishing any labor, materials and/or equipment for, or the performance of any work upon said project, or for anything arising or occurring in connection with said project, whether under said contract between the undersigned and said Contractor or otherwise, and hereby fully end completely releases and discharges the Owner and/or the State of Illinois from any and all such claims.

Witness to Signature: [Signature]  
[Signature]  
Form approved by Legal Counsel - UOCP&RES 07/17

Dated this 18 day of July 20 17  
Hilco Distributing  
Subcontractor/Vendor/Supplier

By: AL DELGADO  
Title: PRESIDENT

00 60 00 - Standard Contract Administration Forms (Multiple)

University of Illinois

DATE: 09/12/2017

Banner Doc #

Address Sequence:

**PAYMENT APPLICATION: PART 1A - PAYMENT CERTIFICATE for**  
Assigned Subcontractor

Address Code:

Check Print Location:

1099? Y N

Encl? Y N

OBFS Approval:

**PROJECT NAME:** 949-C16053 - Hybrid Operating  
Room Suite**PROJECT #:** (#949-C16053)**APPLICANT NAME & ADDRESS:** Linear Electric, Inc.

15346 S. 70th Court, Orland Park, IL 60462

**CONTRACT DIVISION:** Division 05 - Electrical Work**VENDOR REFERENCE:****APPLICATION #:** 006**PAY PERIOD:** 05/07/2017 TO 08/06/2017**ENCUMBRANCE #**E0019081**FINAL PAYMENT?** N**BANNER VENDOR NUMBER:****1.0 CONTRACTOR'S TOTAL CONSTRUCTION CONTRACT SUM****AND ALL CHANGE ORDERS (total of attached SWC)**

(N/A to Assigned Subcontractor's Payment Application)

**2.0 CURRENT CONTRACT/AGREEMENT AMOUNT**

2.1 Applicant's Accepted Base Bid and Alternates: \$259,790.00

2.2 Authorized Change Orders for Applicant's Added Work: + \$158,508.81

2.3 Authorized Change Orders for Applicant's Deleted Work: - \$46,289.83

**2.4 TOTAL (2.1 through 2.3)** \$372,008.98**3.0 CURRENT PAYMENT DUE**

3.1 Total Value of Applicant's Work Completed to Date \$372,008.98

3.2 Less 0% retained (round to nearest dollar): - \$0.00

3.3 Less Payments Previously Certified - \$229,531.84

**3.4 Current Payment Due to Applicant** \$142,477.14**4.1 Assigned Subcontractor's Certification**

I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By: Laura Gora Date 09/31/2017

Authorized Representative

**4.2 Contractor's Approval**

Contractor: International Quality Contracting Inc.

I agree that the Assigned Subcontractor's progress and performance to date on this project is satisfactory and approve payment of the certified amount.

IF CONTRACTOR'S PAY APPLICATION: I also certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By: Sarah Birungi Date 09/31/2017

Authorized Representative

**4.3 Professional Services Consultant's Certification \***

PSC:

Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By: Jason Crowl Date 09/01/2017

Authorized Representative

**4.4 Owner's Representative's Approval \***



University of Illinois-construction unit responsible for the named project approve payment of the amount certified above.

By: Pamela Hill Date 09/01/2017

Authorized Representative

\* Certification only required for Contractor's Payment Application

CFOAPAL (* required fields)						
Chart *	Fund *	Organization *	Account *	Program *	Activity	Location
2	710297	487001	173404	198000		200949
						SEQ #
						\$
						\$142,477.14

<b>AUTHORIZED DEPARTMENT APPROVAL</b>		<b>FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES</b>		<b>SORT</b>
	WE, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.			
	CHAIRPERSON, BOARD OF TRUSTEES			
	SECRETARY, BOARD OF TRUSTEES			
<div style="display: flex; justify-content: space-between;"> <div>  </div> <div> <b>AUTHORIZED CERTIFIER</b> </div> </div>				

Distribution: ☐ University of Illinois construction unit responsible for the named project ☐ Professional Services Consultant ☐ Contractor ☐ ApplicantForm approved by Legal Counsel - UOCP&RES  
07/17

# University of Illinois at Chicago FINAL WAIVER OF LIEN

STATE OF ILLINOIS  
COUNTY OF Cook

} SS

TO WHOM IT MAY CONCERN:

WHEREAS the undersigned has been employed by THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

to furnish Electrical Work

for the project known as 949-C16053 Hybrid Operating Suite

of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner.

THE undersigned, for all in consideration of One Hundred Forty Two Thousand Four Hundred Seventy Six & 72/100  
\$142,476.72 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 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  
10<sup>th</sup> day of August 2017

COMPANY NAME Linear Electric, Inc.

Signature and Seal: Dorothy Fimbianti

NOTE: All waivers must be for the full amount paid. If the 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

} SS

TO WHOM IT MAY CONCERN:

THE undersigned, being duly sworn, deposes and says that he is Dorothy Fimbianti  
President of the Linear Electric, Inc.

who is the contractor for the project known as 949-C16053 Hybrid Operating Suite of which  
THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner.  
That the total amount of the contract including extras is \$372,008.98 on which he has received payment of  
\$229,532.26 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:

SUBCONTRACTOR NAME	SUBCONTRACTOR FEIN	DIVISION OF WORK	CONTRACT PRICE	AMOUNT PAID	THIS PAYMENT	BALANCE DUE
Linear Electric, Inc.	36-3463731	Electrical	\$301,593.98	\$170,682.30	\$130,911.68	\$0.00
Fox Valley Fire & Security	36-2638828	Fire Alarm	\$4,270.00	\$2,998.08	\$1,271.92	\$0.00
Express Electric	36-4421035	Material	\$18,540.00	\$18,540.00	\$0.00	\$0.00
Helsel Jepperson Electric	36-2353807	Material	\$38,615.00	\$37,311.88	\$1,303.12	\$0.00
Advanced Wiring	36-4287362	Low Voltage	\$8,115.00	\$0.00	\$8,115.00	\$0.00
Interstate Electronics	36-2537346	Cable Testing	\$875.00	\$0.00	\$875.00	\$0.00
TOTAL LABOR AND MATERIAL COMPLETED			\$372,008.98	\$229,532.26	\$142,476.72	\$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.

Signed this 10<sup>th</sup> day of August 2017  
"OFFICIAL SEAL"  
LAURA A GORA  
Notary Public, State of Illinois  
My Commission Expires 4/14/2018  
Signature: Dorothy Fimbianti

**FINAL WAIVER OF LIEN**STATE OF ILLINOIS }  
COUNTY OF } SSCity # \_\_\_\_\_  
Loan # \_\_\_\_\_**TO WHOM IT MAY CONCERN:**

WHEREAS the undersigned has been employed by Linear Electric, Inc.  
to furnish Low Voltage Work  
for the premises known as 948-C18823 Hybrid Operating Suite  
of which THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS is the owner.

The undersigned, for and in consideration of Eight Thousand One hundred Fifteen Dollars & 00/100  
\$8,115.00 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, file, under the statutes of the State of Illinois, relating to mechanic's 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, heretofore furnished, or which may be furnished at any time hereafter, by the undersigned for the above described premises, INCLUDING EXTRAS."

DATE September 5, 2017COMPANY NAME Advanced Wiring SolutionsADDRESS 4838 W. 128th Place, Alsip, IL 60803

SIGNATURE AND TITLE

Traci Mucha  
President

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.

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

**CONTRACTOR'S AFFIDAVIT**STATE OF ILLINOIS }  
COUNTY OF } SS**TO WHOM IT MAY CONCERN:**

The undersigned, (NAME) Traci Mucha being duly sworn,  
do(es) and says that he or she is (POSITION) President or (COMPANY NAME)  
Advanced Wiring Solutions who is the Contractor furnishing  
Low Voltage Work work on the building located  
948-C18823 Hybrid Operating Suite Owned by  
THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS

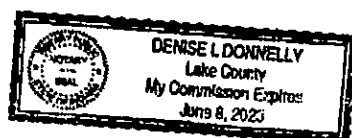
That the total amount of the contract including extras is \$8,115.00 on which he has received partial payment of \$0.00 prior to this payment.  
That all waivers are true, correct and genuine and delivered unconditionally and that there is no claim either legal or equitable to defeat the validity of said waivers. That the following are the names 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
Advanced Wiring Solutions	Labor & Material	8,115.00	-	8,115.00	-
		-	-	-	-
		-	-	-	-
All labor paid in full.		-	-	-	-
		-	-	-	-
ALL MATERIAL TAKEN FROM ANY FIRM STOCK AND DELIVERED TO JOBSITE IN COMPANY OWNED VEHICLES. NO OUTSIDE MATERIALS WERE USED. PRINCIPAL SUPPLIERS:					
TOTAL LABOR & MATERIAL INCLUDING EXTRAS* TO COMPLETE		\$ 8,115.00	\$ -	\$ 8,115.00	\$ -

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 September 5, 2017Signature: Traci MuchaSUBSCRIBED AND SWORN TO BEFORE ME THIS 11th DAY OF SeptSignature: Danish x Donnelly

Notary Public





University of Illinois at Chicago  
1140 South Morgan Street  
Chicago, IL 60607-7143

UNIVERSITY OF ILLINOIS AT CHICAGO

Contractor: UIC - Garco/EHC JV, LLC  
Project Number: 949-C16053-16J  
Project Title: DIVISION 4 VENTILATION SCOPE FOR HYBRID-PROJECT  
Date: May 04, 2017

## JOC Invoice

INVOICE #: 2017-4802JV

Progress on the above referenced Project Number has been reviewed with the Project Manager and agreement has been made on the following percent complete for this billing.

Work Order Total: \$193,792.00



Final Invoice

## Invoice Detail:

Invoice #	Date of Invoice	Percent Complete	Proposal Amount	Amt Earned To Date	Previously Invoiced	Order Invoiced	Retainage	Adjusted Invoice	Retainage Release	Amount Due This
2016-4751 JV	11/09/2016	40.00	\$193,792.00	\$77,516.80	\$0.00	\$77,516.80	\$7,751.68	\$69,765.12	\$0.00	\$69,765.12
2017-4794 JV	03/20/2017	70.00	\$193,792.00	\$135,654.40	\$77,516.80	\$58,137.60	\$5,813.76	\$62,323.84	\$0.00	\$52,323.84
2017-4802 JV	05/04/2017	100.00	\$193,792.00	\$193,792.00	\$135,654.40	\$58,137.60	\$0.00	\$58,137.60	\$13,565.44	\$71,703.04

## Invoice Summary:

Project Total: \$193,792.00  
Previous Project Invoices: \$135,654.40  
Outstanding Balance: \$58,137.60

## Current Invoice:

Current Invoice Amount: \$58,137.60  
Current Credits: \$0.00  
Current Retainage: \$0.00  
Retainage Release: \$13,565.44  
Amount Due This Invoice: \$71,703.04

Total Retainage Held: \$0.00

## Approval Signatures:

Contractor Project Manager

05/04/2017

Date

UIC Project Manager

6.12.2017

Date

SIGN  
& DATE

P1360566

## Substantial Completion / Retainage Reduction

Items required for Substantial Completion & Reduction in Retainage

Failure to Perform Any of These Items will result in Rejection of Request for Substantial Completion and Reduction in Retainage

Pamela Hill (PM): Pamela Hill

Date: 6.14.2017

Contractor's Name: Garco/Ehc JV., LLC.

	YES	NO	N/A
1. Submitted As-Built Documents	X		
2. Accepted As-Built Documents	X		
3. Submitted O & M Manuals	X		
4. Accepted O & M Manuals	X		
5. All other close-out documents completed			
6. All Required Training has been completed	X		
7. All Test Reports, including Test and Balance, have been submitted	X		
8. Test reports have been accepted by: _____			
9. All Punchlist items can be completed within two to three weeks	X		
10. Punchlist items that cannot be finished prior to occupant moving in are such that they can be completed without interfering with the operation of the space	X		
11. Mechanical systems fully commissioned and are working correctly	X		
12. Operating Engineers have inspected and accepted the systems (MEPFP)	X		
13. Waste Recycling Tickets received, Copy to Sustainability, Min 50% required			NA
14. Asbestos Testing and Clearance Submitted, copy to ESHO			NA

## 00 60 00 - Standard Contract Administration Forms (Single)

University of Illinois

DATE: 09/12/2017

Banner Doc #

Address Sequence:

**PAYMENT APPLICATION: PART IA - PAYMENT CERTIFICATE for  
PROFESSIONAL SERVICES CONSULTANT (PSC)**

Address Code:

Check Print Location:

1099? Y N

Encl? Y N

OBFS Approval:

**PROJECT NAME:** 949-C13050 UIHSS New Operating Room and Emergency Department Renovation**APPLICANT NAME & ADDRESS:** Design Organization Inc.

440 N Wells Street, Chicago, IL 60654

**CONTRACT DIVISION:** Professional Services**VENDOR REFERENCE:****APPLICATION #:** 006**PAY PERIOD:** 08/16/2016 TO 06/12/2017**ENCUMBRANCE #**E0016241**FINAL PAYMENT?** N**BANNER VENDOR NUMBER:**

@00899266

**1.0 CURRENT CONTRACT/AGREEMENT AMOUNT**

1.1 Applicant's Accepted Base Bid and Alternates or Fee as applicable		\$719,797.00
1.2 Authorized Change Orders/Amendments for Applicant's Added Work:	+	\$0.00
1.2 Authorized Change Orders/Amendments for Applicant's Deleted Work:	-	\$0.00
<b>1.4 TOTAL (1.1 through 1.3)</b>		<b>\$719,797.00</b>

**2.0 CURRENT PAYMENT DUE**

2.1 Total Value of Applicant's Work Completed to Date		\$572,319.41
2.2 Less 0% retained (round to nearest dollar):	-	\$0.00
2.3 Less Payments Previously Certified	-	\$473,516.42
<b>2.4 Current Payment Due to Applicant</b>		<b>\$98,802.99</b>

**3.1 Applicant's Certification**

I certify that the work covered by this application for payment has been completed to the point indicated herein, that the completed work is in accordance with the contract documents, and that the current payment identified above is now due. I further certify that, immediately upon receipt of the above payment, all Subcontractors, if any, will be promptly paid.

By: Linda Smith

Authorized Representative

Date 06/19/2017**3.3 Professional Services Consultant's Certification****PSC:**

Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By: \_\_\_\_\_

Authorized Representative

Date \_\_\_\_\_

**3.2 Construction Manager's Certification (if applicable)****CM:**

Based on the contract documents, my own observations of the progress of the work and the data comprising the above application, I certify to the Owner that the work has progressed to the point indicated, that the quality of the work appears to be in accordance with the contract documents, and that the Applicant is entitled to payment of the amount certified by him as being currently due.

By: \_\_\_\_\_

Authorized Representative

Date \_\_\_\_\_

**3.4 Owner's Representative's Approval**

University of Illinois-construction unit responsible for the named project

approve payment of the amount certified above.

By: Pamela Hill


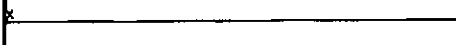
Authorized Representative

Date 06/19/2017

CFOAPAL (* required fields)								
Chart *	Fund *	Organization *	Account *	Program *	Activity	Location	SEQ #	\$
2	710297	467001	173311	198000				\$2000.00
2	710297	467001	173319	198000				\$10118.00
2	710297	467001	173320	198000				\$20115.00
2	710297	467001	173390	198000				\$4546.74
2	710297	467001	173318	198000				\$3500.00



2	710297	467001	173312	198000					\$1310.00
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AUTHORIZED DEPARTMENT APPROVAL		FOR OFFICE OF BUSINESS AND FINANCIAL SERVICES	SORT
	WE, THE UNDERSIGNED, HEREBY CERTIFY THAT THE PAYEE HAS SIGNED A STATEMENT, AS REQUIRED BY THE ILLINOIS PROCUREMENT CODE, AND THAT THE ABOVE BILL IS CORRECT AND PAYABLE FROM THE APPROPRIATION SHOWN.		
		CHAIRPERSON, BOARD OF TRUSTEES	
AUTHORIZED CERTIFIER			

Distribution: ☐ University of Illinois construction unit responsible for the named project ☐ Professional Services Consultant ☐ CM ☐ Applicant

00 60 00-4  
Single

Form approved by Legal Counsel - UOCP&RES 07/17

00 60 00 - Standard Contract Administration Forms (Single)

CFOAPAL (* required fields)								
Chart *	Fund *	Organization *	Account *	Program *	Activity	Location	SEQ #	\$
2	710297	467001	173314	198000				\$16475.00
2	710297	467001	173315	198000				\$3986.00
2	710297	467001	173316	198000				\$34341.00
2	710297	467001	173313	198000				\$2411.25

00 60 00-4  
Single

Form approved by Legal Counsel - UOCP&RES 07/17

**UNIVERSITY OF ILLINOIS MEDICAL CENTER AT CHICAGO**  
**HEALTH FACILITIES AND SERVICES REVIEW BOARD (HFSRB)**  
**UNIVERSITY OF ILLINOIS MEDICAL CENTER AT CHICAGO PROJECT**  
**HFSRB PROJECT #10-073**

**SCHEDULE OF PROJECT COSTS AND SOURCES OF FUNDS**

For the Period from November 5, 2010 to June 15, 2017

UNIVERSITY OF ILLINOIS MEDICAL CENTER AT CHICAGO  
CHICAGO, ILLINIOS

HEALTH FACILITIES AND SERVICES REVIEW BOARD (HFSRB)  
UNIVERSITY OF ILLINOIS MEDICAL CENTER AT CHICAGO SYTEM PROJECT  
HFSRB PROJECT #10-073

SCHEDULE OF PROJECT COSTS AND SOURCES OF FUNDS

For the Period from November 5, 2010 to June 15, 2017

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SCHEDULE OF PROJECT COSTS AND SOURCS OF FUNDS.....	3
NOTES TO THE SCHEDULE OF PROJECT COSTS AND SOURCES OF FUNDS .....	4

***Opinion***

In our opinion, the Schedule referred to above presents fairly, in all material respects, the project costs and sources of funds of University of Illinois Medical Center at Chicago related to the Health Facilities and Services Review Board Project #10-073 for the period November 5, 2010 through June 15, 2017, in conformity with accounting principles generally accepted in the United States of America.

***Emphasis of Matter***

The accompanying Schedule was prepared to present the project costs and sources of funds for the purpose of complying with the terms of the Health Facilities and Services Review Board permit as described in Note 1 and is not intended to be a complete presentation of the University of Illinois Health System's financial position. Our opinion is not modified with respect to this matter.

***Restriction on Use***

This report is intended solely for the information and use of the management of the University of Illinois Medical Center at Chicago and the State of Illinois, and is not intended to be and should not be used by anyone other than these specified parties.



Crowe Horwath LLP

Simsbury, Connecticut  
September 11, 2017



Crowe Horwath LLP  
Independent Member Crowe Horwath International

## REPORT OF INDEPENDENT AUDITOR'S

To the Board of Trustees  
University of Illinois:

### **Report on the Schedule**

We have audited the Schedule of Project Costs and Sources of Funds of University of Illinois Medical Center at Chicago Project #10-073 for the period from November 5, 2010 through June 15, 2017 (the Schedule), and the related notes to the Schedule.

### **Management's Responsibility for the Schedule**

Management is responsible for the preparation and fair presentation of the Schedule in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of the Schedule that is free from material misstatement, whether due to fraud or error.

### **Auditor's Responsibility**

Our responsibility is to express an opinion on the Schedule based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the Schedule is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the Schedule. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the Schedule, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the Schedule in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the Schedule.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

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(Continued)

UNIVERSITY OF ILLINOIS MEDICAL CENTER AT CHICAGO  
 HEALTH FACILITIES AND SERVICES REVIEW BOARD  
 UNIVERSITY OF ILLINOIS MEDICAL CENTER AT CHICAGO PROJECT  
 HFSRB PROJECT #10-073  
 SCHEDULE OF PROJECT COSTS AND SOURCES OF FUNDS  
 Period from November 5, 2010 to June 15, 2017

	Approved Permit Amount	Project Cost		Variance
		Final Approved Alteration	Actual Funds Expended	
Costs:				
Preplanning costs	\$ 280,000	\$ 280,000	\$ 129,298	\$ 150,702
Modernization contracts	24,000,000	22,980,000	25,728,682	(2,748,682)
Contingencies	2,776,195	2,776,195	2,858,742	(82,547)
Architectural/engineering fees	1,954,000	1,954,000	3,429,647	(1,475,647)
Consulting and other fees	558,240	558,240	468,293	89,947
Movable or other equipment	6,000,000	6,000,000	3,495,024	2,504,976
Bond issuance expense	800,000	800,000	374,905	425,095
Net interest expense during construction (project related)	2,818,125	2,818,125	7,683,659	(4,865,534)
Other costs to be capitalized	746,463	746,463	1,762,667	(1,016,204)
Total project cost	<u>\$ 39,933,023</u>	<u>\$ 38,913,023</u>	<u>\$ 45,930,917</u>	<u>\$ (7,017,894)</u>

	Approved CON Amount	Sources of Funds		Variance
		Final Approved Alteration	Actual Funds Spent	
Cash and securities	\$ -	\$ -	\$ 5,997,894	\$ (5,997,894)
Pledges	-	-	-	-
Gifts and bequests	-	-	-	-
Bond issues (project related)	39,933,023	38,913,023	39,933,023	(1,020,000)
Mortgages/loans	-	-	-	-
Leases (fair market value)	-	-	-	-
government appropriations	-	-	-	-
Grants	-	-	-	-
Other funds and sources	-	-	-	-
Total funds	<u>\$ 39,933,023</u>	<u>\$ 38,913,023</u>	<u>\$ 45,930,917</u>	<u>\$ (7,017,894)</u>

See Notes to Schedule of Project Costs and Sources of Funds

UNIVERSITY OF ILLINOIS MEDICAL CENTER AT CHICAGO  
NOTES TO THE SCHEDULE OF PROJECT COSTS AND SOURCES OF FUNDS  
Period from November 5, 2010 to June 15, 2017

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**NOTE 1 - DESCRIPTION OF PROJECT**

University of Illinois Medical Center at Chicago ("UIMCC") was issued a permit to modernize and expand its facilities to meet its current and anticipated needs over the next 10 to 20 years, under the Illinois' Health Facilities and Services Review Board (HFSRB) Project #10-073. Work on the project was started on November 5, 2010 and ended on June 15, 2017. The project was approved by the HFSRB at an estimated cost of \$39,933,023. On October 27, 2016 UIMCC requested an alteration to the permit to delete a portion of the project consisting of modernization contracts in the amount of \$1,020,000. The HFSRB confirmed this alteration on November 22, 2016, resulting in a revised final project cost of \$38,913,023. The actual final project costs totaled \$45,930,917. The Schedule has been prepared in accordance with accounting principles generally accepted in the United States of America and is not intended to be a complete presentation of the University of Illinois Medical Center at Chicago's financial position.

**NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Basis of Accounting: Accounting for the costs on the Schedule was performed in accordance with the accrual basis of accounting.

Use of Estimates: The preparation of the Schedule in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the report amounts of project costs and disclosures over the period covered by the Schedule. Actual project costs could differ from management's estimates.

Project Costs: Costs incurred to modernize and expand the UIMCC's facilities under the HFSRB Project #10-073 are stated at cost within the Schedule. Interest cost incurred, net of interest earnings, on borrowed funds during the construction period are a component of the Project costs.

Sources of Funds: The sources of funds related to the Project have been obtained from UIMCC's cash and securities and the issuance of the University of Illinois Health Services Facilities System Revenue Bonds, Series 2013. The October 1, 2013, bond offering was for \$70,785,000 of which \$39,933,023 related to the Project and mature between October 1, 2027 and October 1, 2033, with interest rates ranging from 5% to 6%.

**NOTE 3 - SUBSEQUENT EVENTS**

University of Illinois Medical Center at Chicago evaluated events and transactions occurring subsequent to June 15, 2017 through September 11, 2017 the date the Schedule was issued. During this period, there were no subsequent events that required recognition or disclosure in the Schedule.