FRESENIUS KIDNEY CARE

Fresenius Kidney Care
3500 Lacey Road, Downers Grove, IL 60515
T 630-960-6807 F 630-960-6812
Email: lori.wright@fmc-na.com

November 7, 2018

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

Re: Final Cost Report. Section 1130.770
Project #17-005, Chicago Vascular ASC
Permit Holder: Chicago Vascular ASC, LLC
Permit Amount: $3,794,239

Dear Ms. Avery:

On behalf of Chicago Vascular ASC, LLC, enclosed please find the final realized cost report submission for the establishment of Chicago Vascular, ASC, along with a signed notarized cost report certification for the project as required pursuant to 7II. Adm. 1130.770.

If you have any questions, please contact me at 630-960-6807.

Sincerely,

Lori Wright

Lori Wright
Senior CON Specialist

cc: Clare Connor

November 7, 2018

Final Cost Report, Section 1130.770

Project #17-005, Chicago Vascular ASC
Permit Holder: Chicago Vascular ASC, LLC
Permit Amount: $3,794,239

This project is for the establishment of a limited specialty ASTC in 12,017 GSF with a project cost of $3,794,239. The facility is located at 700 Pasquinelli Drive in Westmont. The project was obligated with the signing of the construction contract on November 11, 2017. The facility is now licensed, effective 07/26/2018 (license #7003219 attached).

Application and Certificate for Payment (AIA G702)

G-702 attached.

Project Costs and Sources of Funds

Project Costs	**Allowance/CON**	**Realized**
Modernization	321,640	1,158,418
Contingencies	0	0
Architectural/Engineering	30,000	93,625
Consulting and other fees	50,000	29,410
Moveable & Other Equipment	1,076,442	1,076,442
FMV of Leased Space/Equipment	2,316,157	1,100,967
Total Project Costs	**$3,794,239**	**$3,458,862**
Funding	**Allowance/CON**	**Realized**
Cash & Securities	1,478,082	2,357,895
FMV Lease/Equipment	2,316,157	1,100,967
Total funds	**$3,794,239**	**$3,458,862**

There are no costs that have been or will be submitted for reimbursement under Titles XVIII and XIX of the Social Security Act.

Certification of Cost Report
Chicago Vascular, ASC
Project #17-005

Chicago Vascular ASC, LLC certifies that pursuant to 7711. Adm. 1130.770, that the final realized costs of Chicago Vascular, ASC, Project #17-005, are the total costs required to complete the project, and that there are no additional or associated costs or capital expenditures related to the project which will be submitted for reimbursement under Title XVIII or XIX.

BY: _____
Angelo Makris, M.D.

ITS: Manager & Medical Director

Subscribed and Sworn to before me
this 7th day of November, 2018

_____
Notary Public

My commission expires: 12/01/2020

Seal

SHARON M FENNEWALD
Official Seal
Notary Public - State of Illinois
My Commission Expires Dec 1, 2020

APPLICATION AND CERTIFICATE FOR PAYMENT

TO (OWNER):
Chicago Vascular ASC, LLC
700 Pasquinelli Drive
Westmont, IL 60559

FROM (CONTRACTOR):
Shales McNutt LLC
425 Renner Drive
Elgin, IL 60123

CONTRACT FOR:

PROJECT:
American Access Care of Chicago, LLC
CON Project

VIA (Architect):
AndersonMikos Architects, Ltd.
17W110 22nd Street, Suite 220
Oakbrook Terrace, IL 60181

APPLICATION NO. 4

PERIOD TO: April 30, 2018

ARCHITECT'S PROJECT NO:

CONTRACT DATE:

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown below, in connection with the Contract.

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Change Orders approved in previous months by Owner		
TOTAL		
Approved this Month		
Number / Date Approved		
TOTALS	0.00	0.00
	0.00	

1. ORIGINAL CONTRACT SUM		$ 816,771.00
2. Net change by change orders		$ 0.00
3. CONTRACT SUM TO DATE (Line 1+/- 2)		$ 816,771.00
4. TOTAL COMPLETED & STORED TO DATE (Column G on Continuation Sheet)		$ 816,771.00
5. RETAINAGE:		
a. Variable of Completed Work (Column D + E on Continuation Sheet)	$ 0.00	
b. 10 % of Stored Material (Column F on Continuation Sheet)	$ 0.00	
Total Retainage (Line 5a + 5b)		$ 0.00
6. TOTAL EARNED LESS RETAINAGE (Line 4 less Line 5 Total)		$ 816,771.00
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)		$ 690,597.35
8. CURRENT PAYMENT DUE		$ 126,173.65
9. BALANCE TO FINISH, PLUS RETAINAGE (Line 3 less Line 6)		$ 0.00

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

CONTRACTOR:

By: [signature] Date: 5/3/18

State of: Illinois County of: Kane

Subscribed and sworn to before me this 3rd day of May, 2018

Notary Public: Darlene M. Barrer

My Commission Expires: 3-26-20

"OFFICIAL SEAL"
DARLENE M. BARRER
Notary Public, State of Illinois
My Commission Expires 03/26/20

ARCHITECT'S CERTIFICATE FOR PAYMENT

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

AMOUNT CERTIFIED $ 126,173.65

ARCHITECT:

By: _____ Date: _____

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

APPLICATION AND CERTIFICATE FOR PAYMENT

TO (OWNER):
Chicago Vascular ASC, LLC
700 Pasquinelli Drive
Westmont, IL 60559

FROM (CONTRACTOR):
Shales McNutt LLC
425 Renner Drive
Elgin, IL 60123

CONTRACT FOR:

PROJECT:
American Access Care of Chicago, LLC
Non-CON Project

VIA (Architect):
AndersonMikos Architects, Ltd.
17W110 22nd Street, Suite 220
Oakbrook Terrace, IL 60181

APPLICATION NO. 4

PERIOD TO: April 30, 2018

ARCHITECT'S PROJECT NO:

CONTRACT DATE:

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown below, in connection with the Contract.

CHANGE ORDER SUMMARY			
Change Orders approved in previous months by Owner		ADDITIONS	DEDUCTIONS
TOTAL			
Approved this Month			
Number	Date Approved		
CO 1	Apr-18	26,112.95	
TOTALS		26,112.95	0.00
		26,112.95	

1. ORIGINAL CONTRACT SUM			$ 315,534.00
2. Net change by change orders			$ 26,112.95
3. CONTRACT SUM TO DATE (Line 1+/- 2)			$ 341,646.95
4. TOTAL COMPLETED & STORED TO DATE (Column G on Continuation Sheet)			$ 341,646.95
5. RETAINAGE:			
a. Variable of Completed Work (Column D + E on Continuation Sheet)	$	0.00	
b. 10 % of Stored Material (Column F on Continuation Sheet)	$	0.00	
Total Retainage (Line 5a + 5b)			$ 0.00
6. TOTAL EARNED LESS RETAINAGE (Line 4 less Line 5 Total)			$ 341,646.95
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)			$ 267,899.42
8. CURRENT PAYMENT DUE			$ 73,747.53
9. BALANCE TO FINISH, PLUS RETAINAGE (Line 3 less Line 6)			$ 0.00

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

CONTRACTOR:

By: [signature] Date: 5/3/18

State of: Illinois County of: Kane

Subscribed and sworn to before me this 3rd day of May, 20 18

Notary Public: [signature]

My Commission Expires: 3-26-20

"OFFICIAL SEAL"
DARLENE M. BARRER
Notary Public, State of Illinois
My Commission Expires 03/26/20

ARCHITECT'S CERTIFICATE FOR PAYMENT

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

AMOUNT CERTIFIED $ 73,747.53

ARCHITECT:

By: _____ Date: _____

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.