

January 27, 2023

Via electronic mail

Mr. John Kniery Administrator Illinois Health Facilities and Services Review Board 525 West Jefferson, 2nd Floor Springfield, Illinois 62761

Re: MIRA Neuro Behavioral Health Center - Project No. 19-014 (the "Project")

Dear Mr. Kniery:

We had previously notified you that MIRA Neuro Behavioral Health Center (MIRA) had timely completed the Project referenced above when the Illinois Department of Public Health issued its operating license effective October 13, 2022. In compliance with regulations we are now submitting our Final Project Report.

Attached is a table of final Sources and Uses of Funds for the Project. Also attached is the Final G-702.

We certify that the these reported final costs 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. We further certify compliance with all terms of the permit, including project cost, square footage, services approved, and other key elements.

Please contact me or Joe Ourth with any questions regarding this report.

Sincerely

Attachments

cc: Mike Constantino

Joe Ourth

Matthew Barry

CEO

Mira Neuro Behavioral Health Care, LLC

Notarization:

Subscribed and sworn before me

this 30 Hday of January, 2023

Signature of Nata - D. Lii

OFFICIAL SEAL
KAREN E SZAFRANSKI
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES: 12/17/201

Project Costs and Sources or Funds MIRA Neuro-Behavioral Health Center, Tinley Park # 19-014

| | | Approved | | Fin | al |
|--|-----------|-------------|-----------|-----|-----------|
| USE OF FUNDS | CLINICAL | NONCLINICAL | TOTAL | Co | sts |
| Preplanning Costs | | | - | | |
| Site Survey and Soil Investigation | | | - | | |
| Site Preparation | | | - | | |
| Off Site Work | | | - | | |
| New Construction Contracts• | 5,023,356 | 1,335,322 | 6,358,678 | \$ | 6,473,512 |
| Modernization Contracts | | - | | | |
| Contingencies | 75,000 | 25,000 | 100,000 | | |
| Architectural/Engineering Fees | 158,000 | 42,000 | 200,000 | \$ | 180,000 |
| Consulting and Other Fees | 175,000 | 25,000 | 200,000 | \$ | 198,727 |
| Movable or Other Equipment (not in construction contracts) | | | 3.00 | | ŕ |
| Bond Issuance Expense (project related) | | | | | |
| Net Interest Expense During Construction (project related) | | | | | |
| Fair Market Value of Leased Space or Equipment**** | 536,504 | 247,040 | 783,544 | \$ | 783,544 |
| Other Costs To Be Capitalized | | | - | | |
| Acquisition of Building or Other Property (excluding land) | 888,750 | 236,250 | 1,125,000 | \$ | 1,125,000 |
| TOTAL USES OF FUNDS | 6,856,610 | 1,910,612 | 8,767,222 | \$ | 8,760,783 |
| | | | , | | |
| SOURCE OF FUNDS | CLINICAL | NONCLINICAL | TOTAL | | |
| Cash and Securities | 900,000 | 438,345 | 1,338,345 | \$ | 1,331,906 |
| Pledges | | | - | | |
| Gifts and Bequests | | | - | | |
| Bond Issues (project related) | | | - | | |
| Mortgages | | | - | | |
| Leases (fair market value) | 5,864,903 | 1,563,974 | 7,428,877 | \$ | 7,428,877 |
| Governmental Appropriations | | | - | | |
| Grants | | | - | | |
| Other Funds and Sources• | | | | | |
| TOTAL SOURCES OF FUNDS | 6,764,903 | 2,002,319 | 8,767,222 | \$ | 8,760,783 |

^{*****} Hospital equipment, IT hardware and office furniture were acquired on capital leases. This item, represents all FF&E

| APPLICATION AND CERTIFICATION FOR PAYMENT | AIA DOCUMENT G702 PAGE ONE OF PAGES |
|--|--|
| TO OWNER Mira Neuro Behavioral Health PROJECT: Mira Neuro Behavioral | APPLICATION NO: FINAL PAYMENT Distri |
| | ARCHITECT |
| . 75th St Suite 300 | 777707 70. 10 77 70 |
| Palos Heights, Illinois. 60463 Tinley Park, Illinois 60477 TON CONTR ACTOR: VIA ARCHITECT: | PERIOD IO: 10-27-22 |
| | |
| Scott General Contracting Co. | PROJECT NOS: |
| Orland Park, Illinois 60467 | |
| CONTRACT FOR: General Contracting | CONTRACT DATE: |
| CONTRACTOR'S APPLICATION FOR PAYMENT Application is made for payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached. | The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due. |
| Z | CONTRACTOR: |
| CONTRACT SUM TO DATE (Line 1 ± 2) TOTAL COMPLETED & STORED TO \$ 6. | 110 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| - 1 | man W |
| 3. RE ALIVADE. 3. O % of Completed Work \$ \$0.00 | Subscribed and sworm to before me this 1st day of Nov. 2032 |
| (Column D + E on G/U3) b. % of Stored Material \$ (Column F on G703) Total Retainage (Lines Sa + 5b or | Notary Public: Beverly A VAUGHAN My Commission expires: Official Seal Official Seal Official Seal |
| | bserva |
| (Line 4 Less Line 5 Total) | comprising the application, the Architect certifies to the Owner that the Owne |
| 7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate) 9. CTIPS SENTED A VIMENT THE | the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED. |
| JUDING RETAINAGE \$ | AMOUNT CERTIFIED \$ \$765 000 20 |
| CHANGE ORDER SUMMARY ADDITIONS DEDUCTIONS | (Attack explanation if amount certified differs from the amount applied. Initial all figures on this |
| Total changes approved in previous months by Owner \$0.00 | Application and onthe Continuation offices that we commission or conjugate ARCHITECT: |
| Total approved this Month \$0.00 | By: Date: |
| TOTALS \$0.00 \$0.00 | This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the |
| NET CHANGES by Change Order \$0.00 | prejudice to any rights of the Owner or Contractor under this Contract. |
| THE PROPERTY OF THE PROPERTY O | THE AMERICAN INSTITUTE OF ARCHITECTS, 1735 NEW YORK AVE., N.W., WASHINGTON, DC 20008-5292 |

AN DOCUMENT GTOZ: APPLICATION AND CERTIFICATION FOR PAYMENT 1992 ENTIRE 1992.

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

APPLICATION NO: Final Payment

ALA Document G702, APPLICATION AND CERTIFICATION FOR PAYMENT, containing

Contractor's signed certification is attached.

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

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

APPLICATION DATE: October 27, 2022

ARCHITECT'S PROJECT NO:

| | N | | | ь, | N1 | ь. | | _ | _ | _ | _ | - | _ | - | _ | | | | | | | | | | 1 | | NO | A |
|----------------|-------------|----------------|----------------------------|---------------------|--------------------|-----------------------|-------------|--------------------|----------------|--------------|--------------|-------------------|-------------|------------------------|------------------|--------------------|--------------|----------------------|-----------------------------|------------------|------------------------|---------------------|--------------|-------------|-------------|--------------------|---------------------|-----------|
| GRAND TOTALS | | 24 Contingency | 23 Misc. Project Materials | 22 Floor Protection | 21 Floor Coverings | 20 Fireproofing Spray | 19 Roofing | 18 Fire Sprinklers | 7 Ansul System | 16 HVAC | 15 Plumbing | 14 Overhead Doors | 13 Masonry | 2 Restroom Accessories | 1 Electrical | 0 Metal Wall Panel | 9 Storefront | 8 Acoustical Ceiling | 7 Doors, Frames, & Hardware | 6 Carpentry | 5 Concrete Saw Cutting | 4. Structural Steel | 3 Demolition | 2 Concrete | Parking Lot | | DESCRIPTION OF WORK | 8 |
| \$5,000,814.00 | \$25,000.00 | \$100,000.00 | \$30,000.00 | \$22,600.00 | \$265,083.00 | \$264,000.00 | \$52,445.00 | \$66,253.00 | \$5,950.00 | \$759,000.00 | \$695,281.00 | \$23,500.00 | \$15,550.00 | \$25,977.00 | \$847,000.00 | \$32,675.00 | \$243,501.00 | \$148,660.00 | \$439,384.00 | \$690,000.00 | \$75,850.00 | \$56,800.00 | \$66,000.00 | \$39,400.00 | \$10,905.00 | | SCHEDULED | C |
| \$4,790,533.00 | \$25,000.00 | \$100,000.00 | \$30,000.00 | \$22,600.00 | \$238,575.00 | \$264,000.00 | \$57,445.00 | \$99,361.00 | \$5,950,00 | \$682,100.00 | \$635,000.00 | \$23,500.00 | \$15,550.00 | \$25,977.00 | \$762,300.00 | \$32,675.00 | \$243,501.00 | \$148,660.00 | \$439,384.00 | \$690,000.00 | \$75,850.00 | \$56,800.00 | \$66,000.00 | \$39,400.00 | \$10,905.00 | APPLICATION (D+E) | FROM PREVIOUS THIS | D |
| \$210,281.00 | \$0.00 | \$0.00 | 30.00 | \$0.00 | \$26,508.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$76,900.00 | \$60,281.00 | \$0.00 | \$0.00 | \$0.00 | \$84,700.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | THIS PERIOD | Б |
| \$0.00 | \$0.00 | \$0.00 | 30.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | 30.00 | \$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 | (NOT IN D OR E) | PRESENTLY | F |
| \$4,790,533.00 | \$25,000.00 | 3100,000.00 | 300,000.00 | \$22,000.00 | 200,000,000 | \$204,000.00 | 00,000,000 | \$57,301.00 | \$99.261.00 | 3682,100.00 | \$635,000.00 | \$23,500.00 | \$15,550.00 | \$15,577.00 | \$762,300.00 | \$32,675,00 | \$243,501.00 | \$148,660.00 | \$439,384.00 | \$690,000.00 | \$75,850.00 | \$56,800.00 | \$66,000.00 | \$39,400.00 | \$10,905.00 | TO DATE (D+E+F) | COMPLETED | G |
| 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 200.00% | %00.001 | 100.00% | 100.00% | 100.00% | 100.007 | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | | (G÷C) | 8/ |
| 30.00 | \$0.00 | \$0.00 | 60.00 | \$0.00 | \$0.00 | S0 03 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | 50.00 | 80.00 | 90.00 | \$0.00 | 50.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | 30.00 | \$0.00 | \$0.00 | \$0.00 | | TO FINISH | HA ANCE |
| J0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | 80.00 | 00 08 | \$0.00 | \$0.00 | \$0.00 | \$0.00 \$0.00 | \$0.00 | 00.00 | \$0.00 | 90.00 | \$0.00 \$0.00 | \$0.00 | 00.00 | \$0.00 | \$0.00 | \$0.00 | | (IF VARIABLE RATE) | RETAINAGE |

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

AIA Document G702, APPLICATION AND CERTIFICATION FOR PAYMENT, containing

Contractor's signed certification is attached.

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

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

APPLICATION NO: Final Payment

APPLICATION DATE: October 27, 2022
ARCHITECT'S PROJECT NO:

| | | | | | | _ | _ | | | _ | | _ | _ | - | _ | _ | _ | _ | _ | - | - | | _ | | |
|----------------|---------------|----|----|----|----|----|----|------------|---|----|---|----|----|----------------|---------------------|----------------|--------------|--------------------|----------------------|-------------|------------|--------------------------|----------------------|-----------------------|-----------|
| | 25 | 24 | 23 | 23 | 21 | 20 | 19 | 17 | 9 | 15 | 4 | 13 | 12 | haned Haned | 10 | 9 | 00 | 7 | | ه د | . (| . W | | NO TEM | A |
| GRAND TOTALS | | | | | | | | | | | | | | Change Orders | Architectural Plans | Management Fee | Supervision | General Conditions | General Construction | Fire Alarm | | BALANCE FORWARD SHEET #1 | | DESCRIPTION OF WORK | 8 |
| \$6,653,512.00 | | | | | | | | | | | | | | \$149,960.00 | \$200,000.00 | \$580,000.00 | \$115,000.00 | \$58,000.00 | \$490,938.00 | \$58,800.00 | | \$5,000,814.00 | | VALUE | С |
| \$5,888,511.80 | | | | | | | | | | | | | | 33,313.00 | \$180,000.00 | \$216,018.80 | \$100,000.00 | \$66,000.00 | \$441,845.00 | \$58,800.00 | | \$4,790,533.00 | APPLICATION (D+E) | FROM PREVIOUS THIS | D |
| \$/60,000.20 | 00 000 325 | | | | | | | | | | | | | 3114,040.00 | \$20,000.00 | 3,503,981.20 | \$15,000.00 | (\$8,000.00) | \$49,093.00 | \$0.00 | | \$210,281.00 | | THIS PERIOD | E |
| 50,00 | \$0.00 | | | | | | | | | | | | | 60.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | \$0.00 | (NOT IN | PRESENTLY | F |
| 90,000,011.00 | 08 115 888 52 | | | | | | | | | | | | | 9 | \$35,315.00 | \$180,000.00 | 08 810 9103 | \$100,000,00 | \$441,845.00 | \$58,800.00 | | \$4,790,533.00 | TO DATE (D+E+F) | COMPLETED | TOTAL |
| | 100.00% | | | | | | | | | | | | | | 100.00% | 100.00% | 200,001 | 100 00% | 100.00% | 100.00% | | 95.80% | | (G ÷ C) | % |
| | \$0.00 | | | | | | | | | | | | | | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | \$0.00 | | TO FINISH (C - G) | BALANCE |
| | \$0.00 | | | | | | | | | | | | | | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$3,93 | | \$0.00 | | (IF VARIABLE RATE) | RETAINAGE |

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AFFIDAVIT AND WAIVER OF LIEN

| | | X Final | Partial | | Pa mer | nt to Follow | | | |
|--------------------|--|--|----------------------------------|---|---------------------------|---|---------------------|-------------------------|-----|
| tė of | Illinois | | , County of | Cook | | , SS: | | | |
| Mike | Scott | | being duly | sworn states that he | is | President | itle) | | of |
| | (Name of Officer Partner Scott General Co | | | having contracted | with | Mira Neuro Behavi | • | ealth Hospital | |
| | Scott General Co | (Contractor) | | - naving constants | | (Owner) | | | |
| to fur | mish certain materia | s and/or labor as | s follows: | General Contract | ting | (Description) | | | |
| for th | ne project known as | Mira Neuro | Behavioral Hea | lth Hospital | | (Description) | | located at | |
| 6725 | 5 Prosperi Dr., Tini | ey Park, Illinois | 60477 | and owned | l Mira N | euro Behaviral Healt | h Hos | oital | |
| and o | does hereby further | state on behalf o | f the aforemention | ned subcontractor/su | pplier: | | | | |
| | RTIAL WAIVER) that | | | | | | | | |
| • | en Hundred and S | | | | | dollar | s (\$ | 765,000.20 |) |
| (| receipt of which | | | | | Total paid to date | (\$ | 5,888,511.80 |) |
| | • | | | note consideration of | thic Affid | avit and Partial Waive | of Lier | n which is | |
| (|) the payment of given solely wil the undersigne | h respect to said | promised as the samount, and whi | ch waiver shall be eff | fective on | ally upon receipt of payr | nent th | ereof by | |
| (FIN | IAL WAIVER) that th | ere is due from t | he contractor the | sum of | | dolla | ırs (\$ | 0.00 |)) |
| (|) receipt of which | is hereby ackno | włedged; or | | | Total paid to date | (\$ | 0.00 |) |
| (X | the payment o given solely wi the undersign | th respect to said | promised as the amount, and wh | sole consideration of ich waiver shall be ef | this Affic fective or | davit and Partial Waive hly upon receipt of pay | r of Lie ment th | n which is nereof by | |
| abo the to a | ove-described proper | ty and improvem itions or condition iny work perform | ients thereon on a | account of labor or ma ein, if anv: and furthe | aterial or r certifies | any and all lien or clain both, furnished by the that no other party ha said project, and within | unders s any c | laim or right | |
| Fin | m Scott General (| Contracting Co. | | | | Date1 | 1/1/202 | 22 | |
| Ву | Mita | STED | | | | Title Pre | sident o | of S.G.C. | |
| My | tness My Hand and Commission Expire | 3 0 | 1si 24 | day of Notary Public Printed | Nove | BEVERLY A VAUGH, Official Seal Notary Public - State of | Illinois | cha- Aghan | |