

July 20, 2020

Ms. Courtney Avery  
Illinois Health Facilities & Service Review Board  
525 West Jefferson Street  
Springfield, IL 62761

Dear Ms. Avery,

Blessing Hospital is requesting an alteration to project #19-029, which was approved by the board on September 17, 2019 with a total project cost of \$21,393,943. This alteration seeks an increase in total project costs by \$635,012; 2.97% over budgeted amount. There is no change in square footage. A check in the amount of \$1,000 for the alteration fee is included with the hard copy of this letter.

Due to the COVID-19 pandemic, the health system has re-evaluated all projects including the ASTC currently under construction. A full analysis of the structure was completed and gaps identified include; negative pressure zones for safe patient surgical throughput and public restroom entrance considerations. In addition to these changes, other adjustments were identified in the project iteration process after the permit approval.

Included with this letter are the following attachments reflecting the proposed alteration request:

- Project Cost and Source of Funds
- Bond rating

Please note that the proposed Project Cost and Source of Funds includes line items for site and building primarily related to unanticipated conditions that arose after the permit approval consisting of the following:

**Site Preparation:**

**Water Line mitigation** – Upon the permitting process, the City of Quincy voiced a concern about the 24" high pressure water main that was in proximity to the building site. If this main were to need repair or become damaged, significant flooding could result and compromise the building structure. An evaluation was completed where the resolution resulted in a more robust foundation, three foot flood walls behind brick exterior, and flood doors to prevent water from breaching the interior below the building to prevent structural risk.

**Building:**

**Negative pressure rooms** - Modifying two recovery rooms to negative pressure rooms in the ASTC will allow safe intubations and extubations for patients with an unknown COVID-19 status as well as other airborne diseases while in the outpatient setting. This pandemic is a clear risk to all and is one of the many competing risks for patients requiring surgical care. Surgical procedures should be considered not based solely on COVID-19-associated risks, but rather on an assimilation of all available medical and logistical information. The availability of ambulatory procedures gives patients access to screening for disease prevention and early detection.

**Public restroom door** – Due to COVID-19 considerations and patient safety, hands free operation of the doors leading into public facing restrooms will be implemented. Adding this hand-free functionality will assist with infection control measures.

**OR Boom infrastructure for lights** – The original application intent was to utilize the existing lights from the current ASTC. However, in review of the project plan for opening, time for removal of lights from current structure to the install in the new building would require surgical procedures in the ASC setting to halt. Additional time would be needed for the IDPH survey as well.

**Cart washer schematic changes** – The cart washer originally intended for the surgery center, did not fit in the schematic and required redesign of the decontamination space. The cost associated with this is due to construction and architectural fees for the adjusted schematic.

Thank You,



Maureen A. Kahn  
President/CEO  
Blessing Hospital  
PO Box 7005  
Quincy, IL 62305

Enclosures

Cc: Mike Constantino, Lead project reviewer  
Karen Segnor, RN, BSN  
Division Chief  
Illinois Department of Public Health  
Health Care Facilities & Program Division  
525 W. Jefferson Street, 4<sup>th</sup> Floor  
Springfield, IL 62761



# Project Costs and Sources of Funds for ASTC permit #19-029 Alteration

USE OF FUNDS	Approved Permit Amount #19-029		
	CLINICAL	NONCLINICAL	TOTAL
Preplanning Costs	\$29,360	\$34,640	\$64,000
Site Survey and Soil Investigation	\$16,056	\$18,944	\$35,000
Site Preparation	\$387,265	\$456,913	\$844,178
Off Site Work	N/A	N/A	N/A
HVAC (non reviewable)	N/A	\$3,105,380	\$3,105,380
New Construction Contracts	\$6,195,754	\$7,310,031	\$13,505,785
Modernization Contracts	N/A	N/A	N/A
Contingencies	\$619,575	\$815,421	\$1,434,996
Architectural/Engineering Fees	\$496,156	\$746,281	\$1,242,437
Consulting and Other Fees	\$98,860	\$116,640	\$215,500
Movable or Other Equipment (not in construction contracts)	\$114,687	\$135,313	\$250,000
Bond Issuance Expense (project related)	\$53,521	\$63,146	\$116,667
New Interest Expense During Construction (project related)	\$123,862	\$146,138	\$270,000
Fair Market Value of Leased Space or Equipment			
Other Costs to be Capitalized*	\$114,687	\$135,313	\$250,000
Acquisition of Building or Other Property (excluding land)	N/A	N/A	N/A
<b>TOTAL USES OF FUNDS</b>	<b>\$8,249,784</b>	<b>\$13,084,159</b>	<b>\$21,333,943</b>
* Artwork, Furniture, Signage			

Alteration Request August 10, 2020			
	CLINICAL	NON CLINICAL	TOTAL
			\$ 64,000.00
			\$ 35,000.00
			\$ 844,178.00
	\$ 27,088.00	\$ 4,912.00	\$ 3,137,380.00
	\$ 359,216.51	\$ 65,138.49	\$ 13,930,140.00
	\$ 35,166.01	\$ 6,376.82	\$ 1,476,538.83
	\$ 116,067.00	\$ 21,047.00	\$ 1,379,551.00
			\$ 215,500.00
			\$ 250,000.00
			\$ 116,667.00
			\$ 270,000.00
			\$ -
			\$ 250,000.00
			N/A
	<b>\$ 537,537.51</b>	<b>\$ 97,474.32</b>	<b>\$ 21,968,954.83</b>

SOURCE OF FUNDS	CLINICAL	NONCLINICAL	TOTAL
Cash & Securities	\$4,382,808	\$6,951,135	\$11,333,943
Pledges			
Gifts and Bequests			
Bond Issues (project related)	\$3,866,976	\$6,133,024	\$10,000,000
Mortgages			
Leases (fair market value)			
Cgovernmental Appropriations			
Grants			
Other Funds and Sources			
<b>TOTAL SOURCES OF FUNDS</b>	<b>\$8,249,784</b>	<b>\$13,084,159</b>	<b>\$21,333,943</b>

CLINICAL	NONCLINICAL	TOTAL
\$ 537,537.51	\$ 97,474.32	\$11,968,955
		\$0
		\$0
\$ 3,866,975.74	\$ 6,133,024.26	\$10,000,000
		\$0
		\$0
		\$0
		\$0
<b>\$ 4,404,513.25</b>	<b>\$ 6,230,498.58</b>	<b>\$ 21,968,954.83</b>

## Blessing Hospital, Illinois; Hospital

**Primary Credit Analyst:**

Chloe A Pickett, Centennial (1) 303-721-4122; Chloe.Pickett@spglobal.com

**Secondary Contact:**

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### Table Of Contents

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Rationale

Outlook

Enterprise Profile: Strong

Financial Profile: Strong

Credit Snapshot:

# Blessing Hospital, Illinois; Hospital

**(Editor's Note:** This article, originally published Aug. 22, 2019, misstated the rating type of the issuer credit rating on Blessing Hospital. A corrected version follows.)

Credit Profile		
ICR		
Long Term Rating	A/Stable	New
Preliminary Rating	NR	New

## Rationale

S&P Global Ratings assigned its 'A' issuer credit rating (ICR) to Blessing Hospital (Blessing), Ill. The outlook is stable.

The rating reflects our view of Blessing's consistently robust operating performance, supported in recent years by growing inpatient utilization trends, as well as healthy maximum annual debt service (MADS) coverage and a balance sheet highlighted by solid unrestricted reserves and moderate debt. Blessing has maintained a leading market position for many years, as the hospital is embedded in the community and sees outmigration primarily for services not provided in the primary service area (PSA). Blessing has also made strides in strengthening its physician base with increased recruitment and the acquisition of the Hannibal Clinic in the past year. Blessing took out \$45 million in new privately held debt in fiscal 2019, the majority of which will fund capital expansion and improvements to the Moorman Pavilion on its main campus. We expect Blessing to maintain solid operating results throughout a period of heightened capital spending.

On March 5, 2019, a local independent physician group, Quincy Medical Group (QMG), was granted a certificate of need for an ambulatory surgical center (ASC) in Quincy, which could negatively affect volumes and operations at Blessing once open. In response, Blessing will be moving its ASC to the main campus and is recruiting specialty physicians to lessen its reliance on QMG and capture a portion of services that have historically migrated outside of the service area. QMG's ASC will take an estimated 18-24 months to open and Blessing has a plan to cut expenses to address the increased competitive pressure. In our view, the QMG ASC could materially affect Blessing's market position and the rating includes a negative holistic adjustment on Blessing that primarily reflects the uncertainty of the effects on the enterprise and financial profile once QMG's ASC is operational.

The 'A' rating further reflects our view of Blessing's:

- Consistently robust operating margins well above medians for the rating level, contributing to solid MADS coverage;
- Leading and incrementally growing market share in its PSA; and
- Healthy balance sheet, with slightly declining unrestricted reserves due to capital spending, but still in line with the rating level.



Partly offsetting the above strengths, in our view, are Blessing's:

- Location in a more limited rural service area but with a fairly stable economy;
- Reliance on an independent physician group for a majority of hospital admissions; and
- Moderately aggressive debt structure, with almost all debt privately held, although overall debt levels are in line with rating medians.

## Outlook

The stable outlook reflects our expectation of Blessing's continued solid operations, leading business position, and MADS coverage in excess of medians for the rating level. Management continues to invest in its facility, physicians, and secondary market, as well as population health initiatives, which adds further stability to the rating.

### Upside scenario

We believe that the 'A' rating is suitable for the hospital and a higher rating is unlikely within the two-year outlook period given the potential increased competition and heightened capital spending. However, we could consider raising the rating over time if Blessing is able to significantly improve its balance sheet such that metrics are above the 'A' rating level and if the hospital's business position continues to improve.

### Downside scenario

We could lower the rating if unrestricted reserves decline such that metrics are no longer appropriate for the rating. We could also consider a negative outlook or rating action if operations decline such that operating margin and MADS coverage are no longer in line with the rating level. Finally, we would consider a negative rating action if Blessing's market position declines or if market share decreases significantly.

## Enterprise Profile: Strong

### Modest, stable PSA with limited growth projected

Blessing Hospital is in Quincy, Ill., the main retail and industrial city in Adams County and for the wider area. The service area is on the western edge of Illinois, south of the Iowa border and north of the St. Louis area. Overall population in the PSA is stable with 166,000 people, and some limited population and employment growth is projected, although less than for the U.S. as a whole. In addition, per capita income is in line with the national average. The region has many employers and does not depend on any particular one. The economy is based largely on manufacturing and, as the seat of Adams County and the largest community in the area, Quincy is the retail and service hub for a 60-mile radius, with an unemployment rate that is lower than that of the state. The population is slightly older and the overall payer mix includes a slightly high governmental payer exposure, with about 34% of net revenue from Medicare and 10% from Medicaid as of June 30, 2019.

### Leading market position with increased physician focus

Blessing (together with Illini Community Hospital) holds the leading business position in its PSA, with a 61.1% market share, followed by Hannibal Regional Hospital in Missouri, which captures about 15% of the market. Quincy and

Adams County's regional population of 67,000 compared with the PSA population of 166,000 reflects Blessing's broad draw as a regional provider in a largely rural area. Tertiary and quaternary patients that Blessing cannot accommodate typically outmigrate to St. Louis or Columbia. To better serve its community, Blessing continues to expand services, with much recent focus on behavioral health and local retail operations. One of the hospital's larger competitors is Unity Point Health, which operates outside of Blessing's service area and has been exiting the Quincy market over the past several years. In June 2019, Unity Point and Sanford Health announced their intent to merge. While the potential merger would operate a large integrated health system near Blessing, Sanford Health operates primarily in Iowa, North and South Dakota, and Montana. While there is no movement into the Quincy area at this time, we will continue to monitor the possible changes to the competitive landscape as they relate to Blessing.

Blessing employs 72 physicians, who account for 37.5% of total inpatient admissions as of June 30, 2019. The largest independent physician group in the service area is QMG, with over 100 physician members, accounting for about 50% of Blessing's revenue. Although Unity Point Health owns a minority interest in QMG, management reports no significant changes in how QMG directs and manages its patients in the service area.

The greater service area and industry have experienced a declining inpatient admission trend during the past few years, but Blessing has seen some growth as a result of increased physician recruitment and replacement, as well as a focus on key service lines and partnerships with providers in the region. Management is projecting modest growth in inpatient and outpatient volumes given the industry trends.

#### Stable management team with no changes expected

Blessing's management team has been stable and is implementing strategies to maintain its organizational strength. Management continues to review and analyze the large competitive landscape, as well as how health care reform and reimbursement trends might affect the organization. To that end, it has focused on expense controls and on investing in its physician base, and has historically focused on care-coordination strategies that continue to evolve. Blessing joined the BJC Collaborative to help the organization explore and benefit from population health initiatives and quality-based programs. Management has also effectively strengthened its balance sheet during the past few years to maintain some flexibility for challenges that may arise from reimbursement and from the shifts in the broader industry, and to accommodate capital investment.

**Table 1**

Blessing Hospital--Enterprise Statistics				
	--Nine months ended June 30--	--Fiscal year ended Sept. 30--		
	2019	2018	2017	2016
PSA population	N.A.	166,000	166,000	166,000
PSA market share (%)	N.A.	61.1	61.0	59.8
Inpatient admissions	9,266	12,919	12,348	12,101
Equivalent inpatient admissions	27,424	36,103	35,298	33,737
Emergency visits	33,559	48,087	49,022	52,826
Inpatient surgeries	1,974	2,725	2,767	2,657
Outpatient surgeries	11,463	15,196	15,479	13,825
Medicare case mix index	1.6100	1.6600	1.6200	1.5400
FTE employees	2,492	2,425	2,291	2,043

Table 1

Blessing Hospital--Enterprise Statistics (cont.)				
	--Nine months ended June 30--	--Fiscal year ended Sept. 30--		
	2019	2018	2017	2016
Active physicians	173	173	182	193
Based on net/gross revenues	Net	Net	Net	Net
Medicare (%)	34.4	31.7	32.1	33.3
Medicaid (%)	10.8	15.7	16.5	13.8
Commercial/Blues (%)	51.1	49.6	48.6	51.2

N/A--Not applicable. N.A.--Not available. Inpatient admissions exclude normal newborn, psychiatric, rehabilitation, and long-term care facility admissions.

## Financial Profile: Strong

### Consistently healthy operating performance

Operating performance remained healthy in fiscal 2018, primarily because of ongoing successful expense management and increased volumes. Net patient revenue grew to \$554 million in 2018, from \$453 million in 2017. Excluding investment income, joint-venture income, and unrestricted contributions, Blessing generated a robust \$49.4 million in operating income (8.9% margin) in 2018. Through the third quarter interim ended June 30, 2019, operating income was a solid, but lighter \$27.6 million (6.43% margin). Management is budgeting for a 5.5% operating margin in fiscal 2019 due to projected flat patient volumes, although management typically budgets conservatively and we expect Blessing to meet or exceed budget.

With the continued solid operations and healthy investment returns, Blessing's excess income totaled \$57.9 million (10.3% margin) in 2018, contributing to robust MADS coverage of 9.23x based on MADS of \$9 million. We anticipate that MADS coverage will improve as debt service decreases during the next several years.

### Slight deterioration in liquidity projected due to heightened capital spending

Liquidity and financial flexibility remain sound, although capital spending in the past year and future plans will decrease unrestricted reserves. Although deterioration is projected, we expect Blessing's liquidity position to remain sufficient for the rating level. On a pro forma basis, with the expectation of the paydown of existing debt, unrestricted reserves as of June 30, 2019 totaled \$288 million, down from \$314 million in fiscal 2018. Pro forma days' cash on hand is 208 days and unrestricted reserves-to-long-term debt was 180% as of June 30, 2019, which is softer than in previous years but still sufficient for the rating level and expected to improve over the outlook period.

Blessing is budgeting about \$82 million in capital spending in fiscal 2019, which will be funded partially by debt and the rest from operating cash and unrestricted reserves. The majority of the plans include expansion of the main campus, a medical office building on the eastern side of Quincy, and moving its ASC to the main hospital campus. While the capital spending is much higher than in previous years, we believe the updates will benefit the facilities and Blessing's strong operations should support the heightened spending.



## Debt and contingent liability profile

Overall leverage and debt-related metrics are modest and well within rating medians. Pro forma leverage, assuming total long-term debt of \$160 million, is solid at 24% as of June 30, 2019. Blessing has no publicly rated debt, with its entire debt portfolio consisting of privately held bank debt. While we view this structure as more aggressive, we consider Blessing's overall debt profile to be manageable and offset by a healthy unrestricted reserves-to-long-term-debt ratio. As of January 2017, Blessing froze its pension plan to new benefit accruals. The net pension liability in fiscal 2018 was \$35 million, or about 79% funded, up from a funding level of 69% in fiscal 2017, which we view favorably.

Table 2

Blessing Hospital--Financial Statistics					
	--Nine months ended June 30--	--Fiscal year ended Sept. 30--			--Medians for 'A' rated stand-alone hospital--
	2019	2018	2017	2016	2017
<b>Financial performance</b>					
Net patient revenue (\$000s)	391,779	511,485	418,813	378,530	418,910
Total operating revenue (\$000s)	429,866	554,209	453,055	411,020	MNR
Total operating expenses (\$000s)	402,222	504,765	410,121	384,663	MNR
Operating income (\$000s)	27,644	49,444	42,934	26,357	MNR
Operating margin (%)	6.43	8.92	9.48	6.41	1.40
Net nonoperating income (\$000s)	8,794	8,495	3,762	3,095	MNR
Excess income (\$000s)	36,438	57,939	46,696	29,452	MNR
Excess margin (%)	8.31	10.30	10.22	7.11	4.10
Operating EBIDA margin (%)	11.92	13.46	14.05	11.07	8.00
EBIDA margin (%)	13.69	14.76	14.76	11.73	11.70
Net available for debt service (\$000s)	60,046	83,067	67,409	48,587	47,676
Maximum annual debt service (\$000s)	9,000	9,000	9,000	9,000	MNR
Maximum annual debt service coverage (x)	8.90	9.23	7.49	5.40	3.80
Operating lease-adjusted coverage (x)	6.33	5.74	4.92	3.69	3.10
<b>Liquidity and financial flexibility</b>					
Unrestricted reserves (\$000s)	298,177	313,536	239,506	216,852	303,424
Unrestricted days' cash on hand	213.9	236.9	223.0	214.8	240.50
Unrestricted reserves/total long-term debt (%)	246.8	255.1	252.7	213.2	221.60
Unrestricted reserves/contingent liabilities (%)	N/A	N/A	342.6	307.0	470.70
Average age of plant (years)	9.1	10.7	11.9	13.1	11.10
Capital expenditures/depreciation and amortization (%)	148.4	157.9	191.0	194.3	121.60
<b>Debt and liabilities</b>					
Total long-term debt (\$000s)	120,797	122,884	94,768	101,711	MNR
Long-term debt/capitalization (%)	18.9	21.5	20.6	25.3	26.40
Contingent liabilities (\$000s)	N/A	N/A	69,915	70,644	MNR
Contingent liabilities/total long-term debt (%)	N/A	N/A	73.8	69.5	36.20
Debt burden (%)	1.54	1.60	1.97	2.17	2.70

Table 2

Blessing Hospital--Financial Statistics (cont.)					
	—Nine months ended June 30—	—Fiscal year ended Sept. 30—			—Medians for 'A' rated stand-alone hospital—
	2019	2018	2017	2016	2017
Defined-benefit plan funded status (%)	N.A.	79.17	69.16	64.82	88.00
<b>Pro forma ratios</b>					
Unrestricted reserves (\$000s)	288,177	N/A	N/A	N/A	MNR
Total long-term debt (\$000s)	160,128	N/A	N/A	N/A	MNR
Unrestricted days' cash on hand	206.7	N/A	N/A	N/A	MNR
Unrestricted reserves/total long-term debt (%)	180.0	N/A	N/A	N/A	MNR
Long-term debt/capitalization (%)	23.6	N/A	N/A	N/A	MNR

N/A--Not applicable. N.A.--Not available. MNR--Median not reported.

### Credit Snapshot:

Organization description: Our analysis incorporates the entire Blessing Corporate Services (BCS) organization, which consists of Blessing, a not-for-profit, 327-staffed-bed acute care hospital; an employed physician group with about 65 employed physicians (Blessing Physician Services); The Blessing Foundation Inc., which engages primarily in fundraising to benefit the not-for-profit subsidiaries of BCS; Denman Services Inc., which sells and rents medical equipment and operates a commercial laundry service for hospitals; Blessing Care Corp. (doing business as Illini Community Hospital), a rural 25-bed critical access hospital; and Hannibal Clinic, a physician group based in Hannibal, Missouri, which employs over 35 physicians.

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VENDOR NUMBER: 10805		VENDOR NAME: IL DEPT OF PUBLIC HEALTH		
INVOICE DATE	INVOICE NUMBER	INVOICE AMOUNT	DISCOUNT	AMOUNT PAID
07/21/20	CON Alteration request 19	1,000.00	0.00	1,000.00
By acceptance of payment from buyer and/or endorsement of this draft or the invoice referenced herein, seller acknowledges and agrees that buyer is rejecting any standard terms and conditions offered by seller as part of its invoice, other than price, quantity, shipping, warranty, and payment terms. Buyer accepts only those terms and conditions which it has expressly consented to in writing signed by an authorized agent of buyer. Any additional terms or different terms or any attempt by seller to make such standard terms and conditions a part of the sale are hereby objected to and shall be deemed material.			TOTAL \$ 1,000.00	

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ORDER OF: IL DEPT OF PUBLIC HEALTH  
535 WEST JEFFERSON STREET  
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\*\*\*\*\*\$1,000.00

ONE THOUSAND DOLLARS AND ZERO CENTS \*\*\*\*\*

FIRST BANKERS TRUST COMPANY, N.A.  
CHECKING ACCOUNT  
QUINCY, IL 62301

*Maurice Kahn*  
AUTHORIZED SIGNATURE

TWO SIGNATURES REQUIRED IF OVER \$5000

547482 0812005861 100002104