



midwest

MEDICAL CENTER

December 10, 2025

VIA OVERNIGHT MAIL

Mr. John P Kniery, Administrator, Chairperson State of Illinois
Health Facilities and Services Review Board
525 West Jefferson St.
Springfield, IL 62761

Re: **NOTIFICATION OF PROJECT COMPLETION AND REALIZED COSTS REPORT**

Project Number: #24-033
Facility Name: Midwest Medical Center
Facility Address: One Medical Center Drive, Galena, IL
Applicants: Midwest Medical Center, Midwest Medical Foundation
Licensee/Operating: Midwest Medical Center
Project Description: Add Surgical Suite/Modernization of Support Space
Permit Amount: \$10,350,000
Permit Conditions: None
Financial Commitment Date: April 30, 2026
Project Completion Date: April 30, 2026
Annual Progress Report Due Date: April 30, 2026

Dear Mr. Kniery:

Pursuant to the requirements under the Illinois Health Facilities Planning Act and 77 Ill. Adm. Code 1130.770 we are hereby submitting our Project Completion and Finalized Costs Report for Project Number 24-033 referenced above (the "Project").

This letter constitutes notice that the Project has been brought to conclusion.

A Report of Final Realized Costs is attached hereto as Attachment 1, which includes the following information:

- 1) itemization of all Project costs;
- 2) certification that the final realized costs, as itemized, 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;

Midwest Medical Center

1 Medical Center Drive, Galena, IL 61036
(815) 777-1340

Midwest Health Clinic

1 Medical Center Drive, Galena, IL 61036
117 N. Main Street, Elizabeth, IL 61028
(815) 776-7381 or (815) 858-2238

Midwest Senior Care

215 Summit Street, Galena, IL 61036
(815) 776-7254
1054081\327183446.v1

3) certification of compliance with all terms of the permit to date, including project cost, square footage, services, etc.; certification attesting to compliance with the requirements of 77 Ill. Adm. Code 1130.770, in the form of a notarized statement signed by an authorized representative of the permit holder;

4) the final Application and Certification for Payment for the construction contract, as per the American Institute of Architects form G702 or equivalent; and

5) 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, an audited financial report of all Project costs and sources of funds, completed by an independent certified public accountant.

Please let us know if you have any questions or concerns.

Very truly yours,

MIDWEST MEDICAL CENTER

A handwritten signature in cursive script, reading "Tracy R. Bauer".

Tracy Bauer, President/CEO

cc: Mike Constantino via email: mike.constantino@illinois.gov

Disbursal Record for:

MIDWEST MEDICAL CENTER PROJECT FINANCING

Date of Payment to Vendor	Contractor / Vendor	Description of Expense	Draw #	Series C Bonds (Interim Financing) / USDA Direct Loan	Owner's Equity	TOTAL
				\$9,350,000.00	\$1,300,000.00	\$10,650,000.00
	Additional Cash Equity Deposits			\$0.00	\$0.00	\$0.00
	Adjusted Financing / Equity Figures			\$9,350,000.00	\$1,300,000.00	\$10,650,000.00
Pre-Closing	See Owner Equity Paid Items Tab	See Owner Equity Paid Tab			\$422,825.55	\$422,825.55
	Compeer Financial	Title Insurance Premiums & Fees			\$11,603.00	\$11,603.00
	U.S. Bank Corporate Trust	Trustee Fees			\$1,000.00	\$1,000.00
	Held in Bond Fund at US Bank	Bond Fund - Capitalized Interest		\$325.88		\$325.88
3/18/2025	Market & Johnson	Construction Contract Pay App 1	1		\$195,545.23	\$195,545.23
4/9/2025	Market & Johnson	Construction Contract Pay App 2	2		\$300,875.73	\$300,875.73
5/1/2025	US Bank / Series C Bondholders	Construction Interest - Series C		\$359.02	\$0.00	\$359.02
5/19/2025	Market & Johnson	Construction Contract Pay App 3	3	\$596,109.88	\$68,150.49	\$664,260.37
6/1/2025	US Bank / Series C Bondholders	Construction Interest - Series C		\$1,322.03	\$0.00	\$1,322.03
6/11/2025	Market & Johnson	Construction Contract Pay App 4	4	\$212,279.57		\$212,279.57
7/1/2025	US Bank / Series C Bondholders	Construction Interest - Series C		\$3,382.94	\$0.00	\$3,382.94
7/8/2025	Market & Johnson	Construction Contract Pay App 5	5	\$813,989.43		\$813,989.43
8/1/2025	US Bank / Series C Bondholders	Construction Interest - Series C		\$6,545.83	\$0.00	\$6,545.83
8/15/2025	Market & Johnson	Construction Contract Pay App 6	6	\$399,422.79		\$399,422.79
9/1/2025	US Bank / Series C Bondholders	Construction Interest - Series C		\$8,458.37	\$0.00	\$8,458.37
9/12/2025	Market & Johnson	Construction Contract Pay App 7	7	\$1,150,329.27		\$1,150,329.27
10/1/2025	US Bank / Series C Bondholders	Construction Interest - Series C		\$12,307.68	\$0.00	\$12,307.68
10/22/2025	Market & Johnson	Construction Contract Pay App 8	8	\$1,840,109.27		\$1,840,109.27
11/1/2025	US Bank / Series C Bondholders	Construction Interest - Series C		\$17,298.25	\$0.00	\$17,298.25
12/2/2025	Market & Johnson	Construction Contract Pay App 9	9	\$724,384.50		\$724,384.50
						\$0.00
Total Disbursements				\$5,786,624.71	\$1,000,000.00	\$6,786,624.71
Remaining Funds				\$3,563,375.29	\$300,000.00	\$3,863,375.29

DRAW REQUEST AND REQUISITION CERTIFICATE # 9

Midwest Medical Center Project – Galena, IL

Secured Rural America Bonds - \$9,350,000.00
Series 2023C

In accordance with the terms of that certain Indenture, dated as of June 8, 2023 (the “Indenture”), and First Supplement to Indenture, dated as of March 14, 2025 (the “First Supplement to Indenture”), by and between Midwest Medical Foundation, an Illinois not for profit corporation and Midwest Medical Center, an Illinois not for profit corporation (each a “co-Issuer” and collectively the “co-Issuers”), Compeer Financial, FLCA (“Servicer”), and U.S. Bank Trust Company, National Association (the “Trustee”), as well as the Bond Documents (as defined in the Indenture), and the Disbursing Agreement, dated as of June 8, 2023 (the “Disbursing Agreement”), and the First Supplement to Disbursing Agreement, dated as of March 14, 2025 (the “First Supplement to Disbursing Agreement”), by and between co-Issuers, Servicer, Trustee, and Compeer Financial, ACA (the “Disbursing Agent”), the undersigned representatives for the co-Issuers hereby authorizes the Trustee, Servicer, and Disbursing Agent to direct \$724,384.50 (the “Advance”) from the Construction Fund to the parties indicated in the **attached listing of payment recipients**:

The Trustee is authorized to transfer the Advance detailed above to the Servicer via the Disbursing Agent’s direction, via the instructions below:

WIRE INSTRUCTIONS:

Routing Bank: AgriBank, FCB
Routing Bank’s Location: St. Paul, MN
ABA#: 096016972

FOR FURTHER CREDIT TO:

Beneficiary Name: Compeer Financial, ACA
Beneficiary Account Type: Checking
Beneficiary Account #: 362408688
Customer Name: #7909905300 Midwest Medical

The undersigned does certify that:

1. Attached hereto is a properly completed and executed Draw Request, together with appropriately completed attachments thereto. Copies of all lien waivers, invoices, statements, bills of sale and related documents evidencing the obligation for which payment is requested and such other documents as required by the Bond Documents, Disbursing Agent, or Servicer are attached or will be provided prior to advancement of funds pursuant to this Draw Request.
2. The expenditures for which moneys are requisitioned hereby represent eligible Project Costs that have not been included in a previous Draw Request, and co-Issuers have no knowledge of any liens or obligations that should be paid or satisfied prior to the Disbursing Agent making payment.
3. The moneys requisitioned hereby are not greater than those necessary to meet obligations due and payable to third parties or reimbursements to any co-Issuer for costs paid by any co-Issuer for the Project, unless otherwise approved.
4. The Project is being constructed or installed in accordance with the Plans and Specifications and construction contracts approved by the Servicer and USDA.

5. Co-Issuers have complied with all terms and conditions set forth in the Bond Documents and any other document or agreement executed or delivered in connection therewith.
6. The representations and warranties of co-Issuers contained in the Bond Documents are true and correct on and as of the date of this Draw Request and Requisition Certificate with the same effect as if made on such date.
7. No "Event of Default" as defined in the Bond Documents has occurred (irrespective of the expiration of any grace or notice period provided with respect thereto) and is continuing.
8. Co-Issuers are not in default on the date of this Draw Request in its observance or performance of any of the terms and conditions of any other document or agreement executed or delivered in connection with the Bond Documents.

Dated December 2, 2025

MIDWEST MEDICAL FOUNDATION, as Co-Issuer

By: Kelli Jackson
Its: CFO

MIDWEST MEDICAL CENTER, as Co-Issuer

By: Kelli Jackson
Its: CFO

Approved on Dec. 3, 2025

COMPEER FINANCIAL, FLCA, as Servicer

By: Todd G. Kasper
Its: Senior Financing Officer

DRAW REQUEST & REQUISITION OF FUNDS DETAIL

Project: Midwest Medical Center 2023 - Surgical Expansion

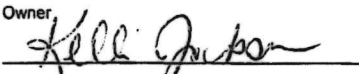
Owner: Midwest Medical Center

Vendor	Budget Category or Description of Expense	Invoice or Pay App #	Amount from Owner's Equity	Amount from \$9.35MM Series C Bonds (Interim)	Total Amount
(Project expenses to be paid directly to Vendor)					
Market & Johnson	Construction Contract	102539	\$0.00	\$724,384.50	\$724,384.50
					\$0.00
					\$0.00
					\$0.00
					\$0.00
Total Directly to Vendors			\$0.00	\$724,384.50	\$724,384.50

Vendor	Budget Category or Description of Expense	Invoice or Pay App #	Amount from Owner's Equity	Amount from \$9.35MM Series C Bonds (Interim)	Total Amount
(Project expenses Paid by Owner to be Reimbursed to Owner)					
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
Total Owner Reimbursement			\$0.00	\$0.00	\$0.00

Total Funds Directly to Vendors	\$724,384.50
Total Owner Reimbursement	\$0.00
Exhibit A Draw Request & Requisition Certificate (Enter into Certificate Requesting Funds to Make Payn	\$724,384.50 CORRECT

I, as Owner, hereby certify that all work, labor and materials to be paid for, or already paid by Owner, in this requisition are in accordance with the contract drawings and specifications for the Project to the best of my knowledge.

Owner


Title
 CFO
 Date
 11/24/2025

The review and acceptance of this estimate does not attest to the correctness of the quantities shown or that the work has been performed in accordance with the contract documents.

Agency (USDA RD)
ANDREA IMEL
Digitally signed by ANDREA IMEL
 Date: 2025.11.25 14:44:59 -06'00'

Title
Area Specialist

Form RD 1924-18
(Rev. 6-97)UNITED STATES DEPARTMENT OF AGRICULTURE
RURAL DEVELOPMENT
FARM SERVICE AGENCY

PARTIAL PAYMENT ESTIMATE

CONTRACT NO.
09

PARTIAL PAYMENT ESTIMATE NO.

PAGE

OWNER:

Midwest Medical Center Surgery

CONTRACTOR:

Market & Johnson, Inc.

PERIOD OF ESTIMATE

FROM 10/1/25 TO 10/31/25

CONTRACT CHANGE ORDER SUMMARY

ESTIMATE

No.	Agency Approval Date	Amount		
		Additions	Deductions	
				1. Original Contract \$9,278,449.00
				2. Change Orders \$0.00
				3. Revised Contract (1 + 2) \$9,278,449.00
				4. Work Completed* \$7,001,329.18
				5. Stored Materials* \$7,001,329.18
				6. Subtotal (4 + 5) \$7,001,329.18
				7. Retainage* \$700,132.94
				8. Previous Payments \$5,576,811.74
				9. Amount Due (6-7-8) \$724,384.50
TOTALS		\$0.00	\$0.00	* Detailed breakdown attached
NET CHANGE		\$0.00	\$0.00	

CONTRACT TIME

Original (days) _____

Revised _____

Remaining _____

On Schedule

☒ Yes
☐ No

Starting Date 1/13/25

Projected Completion 4/11/26

CONTRACTOR'S CERTIFICATION:

The undersigned Contractor certifies that to the best of their knowledge, information and belief the work covered by this payment estimate has been completed in accordance with the contract documents, that all amounts have been paid by the contractor for work for which previous payment estimates was issued and payments received from the owner, and that current payment shown herein is now due.

Contractor Market & Johnson, Inc.By Tyler SchulzDate 11/5/25

APPROVED BY OWNER:

Owner Midwest Medical CenterBy Kelli JacksonDate 11-24-25

ARCHITECT OR ENGINEER'S CERTIFICATION:

The undersigned certifies that the work has been carefully inspected and to the best of their knowledge and belief, the quantities shown in this estimate are correct and the work has been performed in accordance with the contract documents.

Architect or Engineer River Valley ArchitectsBy Adam BergDate 11/24/2025

ACCEPTED BY AGENCY:

The review and acceptance of this estimate does not attest to the correctness of the quantities shown or that the work has been performed in accordance with the contract documents.

By **ANDREA IMEL** Digitally signed by ANDREA IMEL
Date: 2025.11.25 14:33:02 -06'00'

By

Title Area SpecialistDate 11/25/25

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0575-0042. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information.

APPLICATION AND CERTIFICATE FOR PAYMENT

Invoice #: 102539

To Owner: Midwest Medical Center
1 Medical Drive
Galena, IL 61036

Project: 3430- Midwest Medical Center Surgery
1 Medical Drive
Galena IL 61036

Application No.: 9

Period To: 10/31/2025

Distribution to:
Owner ☐
Architect ☐
Contractor ☐

From Contractor: Market & Johnson, Inc.
2350 Galloway Street
Eau Claire, WI 54703

Via Architect:

Contract For:

Contract Date:

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract.
Continuation Sheet is attached.

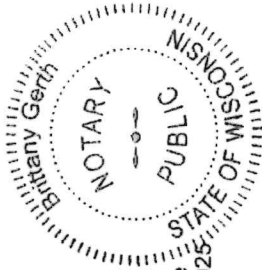
The undersigned Contractor certifies that to the best of the Contractor's knowledge, information, and belief, the work covered by this Application for Payment has been completed in accordance with the Contract Documents. That all amounts have been paid by the Contractor for Work for which previous Certificates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

1. Original Contract Sum \$9,278,449.00
2. Net Change By Change Order \$0.00
3. Contract Sum To Date \$9,278,449.00
4. Total Completed and Stored To Date \$7,001,329.18
5. Retainage :
a 10.00% of Completed Work \$700,132.94
b 0.00% of Stored Material \$0.00
- Total Retainage \$700,132.94
6. Total Earned Less Retainage \$6,301,196.24
7. Less Previous Certificates For Payments \$5,576,811.74
8. Current Payment Due \$724,384.50
9. Balance To Finish, Plus Retainage \$2,977,252.76

CONTRACTOR: Market & Johnson, Inc.

By: Tyler Schuch Date: 11/3/25

State of: Wisconsin County of: Eau Claire
Subscribed and sworn to before me this 3 day of November 2025
Notary Public: Brittany Gerth
My Commission expires: June 16, 2028



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 \$724,384.50

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

ARCHITECT:

By: Adam Berg Date: 11/24/2025

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.

CHANGE ORDER SUMMARY	Additions	Deductions
Total changes approved in previous months by Owner	\$0.00	\$0.00
Total Approved this Month	\$0.00	\$0.00
TOTALS	\$0.00	\$0.00
Net Changes By Change Order	\$0.00	

CONTINUATION SHEET

Page 2 of 3

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.: 9
Application Date: 10/31/2025
To: 10/31/2025
Architect's Project No.:

Invoice #: 102539 Contract: 3430- Midwest Medical Center Surgery

A Item No.	B Description of Work	C Scheduled Value	D From Previous Application (D+E)	E Work Completed This Period In Place	F Materials Presently Stored (Not in D or E)	G Total Completed and Stored To Date (D+E+F)	H % (G / C)	I Balance To Finish (C-G)	J Retainage
02 41 16	Structure Demolition	4,812.00	0.00	0.00	0.00	0.00	0.00%	4,812.00	0.00
03 30 00	Cast In Place Concrete	173,333.00	173,333.00	0.00	0.00	173,333.00	100.00%	0.00	17,333.30
04 20 00	Unit Masonry	198,000.00	198,000.00	0.00	0.00	198,000.00	100.00%	0.00	19,800.00
05 10 01	Structural Steel Install	76,250.00	76,250.00	0.00	0.00	76,250.00	100.00%	0.00	7,625.00
05 10 02	Structural Steel Supply	176,031.00	176,031.00	0.00	0.00	176,031.00	100.00%	0.00	17,603.10
05 45 00	Metal Support	71,177.00	17,394.43	27,358.96	0.00	44,753.39	62.88%	26,423.61	4,475.34
06 10 00	Building Works	753,703.80	378,629.10	15,001.00	0.00	393,630.10	52.23%	360,073.70	39,363.01
07 24 00	Exterior Insulation and Finish Systems	53,800.00	53,800.00	0.00	0.00	53,800.00	100.00%	0.00	5,380.00
07 27 00	Air Barriers	22,000.00	22,000.00	0.00	0.00	22,000.00	100.00%	0.00	2,200.00
07 50 00	Membrane Roofing	220,000.00	163,188.90	56,811.10	0.00	220,000.00	100.00%	0.00	22,000.00
07 81 00	Applied Fireproofing	58,500.00	58,500.00	0.00	0.00	58,500.00	100.00%	0.00	5,850.00
07 90 00	Joint Sealants	15,000.00	0.00	0.00	0.00	0.00	0.00%	15,000.00	0.00
08 80 00	Glazing	80,600.00	35,165.00	0.00	0.00	35,165.00	43.63%	45,435.00	3,516.50
09 21 16	Gypsum Board Assemblies	585,628.00	430,611.50	0.00	0.00	430,611.50	73.53%	155,016.50	43,061.15
09 30 00	Tiling	16,820.00	0.00	0.00	0.00	0.00	0.00%	16,820.00	0.00
09 50 00	Ceilings	82,701.00	80,306.75	2,394.25	0.00	82,701.00	100.00%	0.00	8,270.11
09 60 00	Flooring	263,217.00	0.00	0.00	0.00	0.00	0.00%	263,217.00	0.00
09 90 00	Painting	73,179.36	38,260.50	0.00	0.00	38,260.50	52.28%	34,918.86	3,826.05
12 20 00	Window Treatments	7,500.00	0.00	0.00	0.00	0.00	0.00%	7,500.00	0.00
21 00 00	Fire Suppression	84,250.00	84,250.00	0.00	0.00	84,250.00	100.00%	0.00	8,425.00
23 00 00	HVAC	3,594,308.91	2,773,988.37	188,034.88	0.00	2,962,023.25	82.41%	632,285.66	296,202.32
26 00 00	Electrical	891,220.49	339,000.00	206,999.99	0.00	545,999.99	61.26%	345,220.50	54,600.00
31 00 00	Earthwork	352,820.00	352,820.00	0.00	0.00	352,820.00	100.00%	0.00	35,282.00
32 12 16	Asphalt Paving	84,885.12	0.00	84,885.12	0.00	84,885.12	100.00%	0.00	8,488.51
32 90 00	Landscaping	39,280.88	0.00	0.00	0.00	0.00	0.00%	39,280.88	0.00
91 10 00	Builders Risk Insurance	5,000.00	5,000.00	0.00	0.00	5,000.00	100.00%	0.00	500.00
91 20 00	Performance and Payment Bonds	42,449.00	42,449.00	0.00	0.00	42,449.00	100.00%	0.00	4,244.90
91 30 00	Contractors Insurance	65,781.00	28,123.95	15,980.37	0.00	44,104.32	67.05%	21,676.68	4,410.44
91 40 00	Building Permit	45,699.00	45,699.00	0.00	0.00	45,699.00	100.00%	0.00	4,569.90
91 50 00	General Conditions/General Requirement	875,762.00	399,688.65	178,314.27	0.00	578,002.92	66.00%	297,759.08	57,800.31
94 00 10	Construction Contingency - Owners	-70,625.56	0.00	0.00	0.00	0.00	0.00%	-70,625.56	0.00
95 00 00	Fee (3.75% on Above Items)	335,366.00	223,968.34	29,091.75	0.00	253,060.09	75.46%	82,305.91	25,306.00
Grand Totals		9,278,449.00	6,196,457.49	804,871.69	0.00	7,001,329.18	75.46%	2,277,119.82	700,132.94

LIEN WAIVER, RELEASE AND CERTIFICATION OF PAYMENT

The undersigned, having contracted with Midwest Medical Center to provide labor, materials, skill or equipment for the project known as Midwest Medical Center Surgery Addition - Galena, Galena, Illinois, (the "project"), having received payments totaling \$5,576,811.74 and in consideration of such payments, hereby waives and releases any rights to claim a mechanic's lien, or any other lien rights or claims (including, without limitation, claims under public works statutes, claims against bonds and other rights afforded by law to protect unpaid subcontractors, laborers and suppliers of machinery, tools, equipment, materials, supplies, services and other construction items), which lien waiver and release shall extend to all of the labor, materials, skills, equipment, tools, supplies, services and associated items furnished to or for the project prior to and including the 30th day of September, 2025 with the exception only of unpaid retention and billings in the amount of \$619,645.75.

The undersigned certifies and represents that he has paid in full for all labor, materials, skills, equipment, tools, supplies, services and associated items furnished for the undersigned's use in connection with the project, except the dollar amounts and named individuals or entities below, if any:

None

This Lien Waiver and Release and the representations contained herein are made with the intent that the owner, general contractor, surety, if any, parties who have an interest in the Project, and any other individual or entity, may rely upon the language of this Lien Waiver and Release.

The undersigned has executed this Lien Waiver and Release voluntarily and with full knowledge of his rights under the laws of the State of Wisconsin.

Date: October 31, 2025

Market & Johnson, Inc.

By: Brittany Gerth

Brittany Gerth, Controller

CONDITIONAL LIEN WAIVER, RELEASE AND CERTIFICATION OF PAYMENT

The undersigned, having contracted with Midwest Medical Center to provide labor, materials, skill or equipment for the project known as the Midwest Medical Center Surgery Addition - Galena, Galena, Illinois (the "project"), upon receipt of payment in the amount of \$724,384.50 and in consideration of such payment, hereby waives and releases any rights to claim a mechanic's lien, or any other lien rights or claims (including, without limitation, claims under public works statutes, claims against bonds and other rights afforded by law to protect unpaid subcontractors, laborers and suppliers of machinery, tools, equipment, materials, supplies, services and other construction items), which lien waiver and release shall extend to all of the labor, materials, skills, equipment, tools, supplies, services and associated items furnished to or for the project prior to and including the 31st day of October, 2025 with the exception only of unpaid retention in the amount of \$700,132.94 and unpaid billings of \$0.00.

The undersigned certifies and represents that she has paid in full for all labor, materials, skills, equipment, tools, supplies, services and associated items furnished for the undersigned's use in connection with the project, except the dollar amounts and named individuals or entities below, if any:

NONE

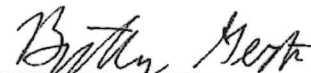
This Conditional Lien Waiver and Release and the representations contained herein are made with the intent that the owner, general contractor, surety, if any, parties who have an interest in the Project, and any other individual or entity, may rely upon the language of this Conditional Lien Waiver and Release.

The undersigned has executed this Conditional Lien Waiver and Release voluntarily and with full knowledge of her rights under the laws of the State of Wisconsin.

Date: October 31, 2025

Market & Johnson, Inc.

By:



Brittany Gerth
Controller