

November 26, 2012

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HEALTH FACILITIES &
SERVICES REVIEW BOARD

VIA FEDERAL EXPRESS

Illinois Health Facilities and Services Review Board
525 West Jefferson, Second Floor
Springfield, Illinois 62761
Attn: Courtney R. Avery

Re: Report of Final Realized Costs for Gailey Eye Surgery – Decatur
(formerly Advanced Eye Surgery and Laser Center), Project Number 12-
023

Ms. Avery:

In accordance with the Health Facilities Planning Procedural Rules (77 Ill. Adm. Code 1130), Gailey Eye Surgery, LLC (formerly Gailey Eye Surgery – Decatur, LLC) and Gailey Eye Surgery – Decatur, LLC (formerly Advanced Eye Surgery and Laser Center, LLC) (the "Applicants") respectfully submit this final realized cost report for the approved project.

I. Current Status of the Project

At the time of the submission of this report, the project is complete. The Gailey Eye Surgery – Decatur change of ownership transaction was completed on August 31, 2012.

I hereby certify that there have been no changes in the scope or size of the project and the approved services. I hereby certify that the project is in compliance with all of the terms of the permit to date, including project cost.

II. Costs Incurred to Date

The approved permit amount is \$1,695,000. The final realized costs associated with this project through completion total \$1,318,763, covering the purchase price of this change of ownership transaction and associated consulting and legal fees. See Table 1. These final costs are the total costs to complete the project.

No costs or capital expenditures related to this project will be submitted for reimbursement under Title XVIII or XIX.

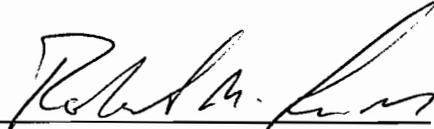
All project costs through project completion were funded through cash and securities.

III. Final Application and Certification for Payment

The requirement for submission of the final application and certification for payment is inapplicable as there is no construction associated with this project.

We appreciate the opportunity to present this information to you. Please do not hesitate to contact Tom Restivo at 309-829-5311 if you have any questions or require additional information.

Sincerely,



NAME: **Robert M. Lee, MD**
TITLE: **Member**

Subscribed and Sworn to before me this
26 day of November, 2012



Notary

Enclosures



TABLE 1
 Gailey Eye Surgery – Decatur (formerly Advanced Eye Surgery and Laser Center)
 Project 12-023
 Project Completion Report – Project Costs

Use of Funds	Total Amount
Consulting and Other Fees	\$218,763
Purchase Price of Membership Units	\$1,100,000
TOTAL COSTS	\$1,318,763