



UnityPoint Health
Trinity

Jay Willsher, FACHE
Chief Operating Officer
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March 20, 2014

RECEIVED

MAR 24 2014

**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

Ms. Courtney Avery
Administrator
Health Facilities and Services Review Board
Second Floor
525 West Jefferson
Springfield, Illinois 62761

Dear Ms. Avery:

In accordance with 77 Illinois Admin. Code § 1130.760, this is the first annual progress report for Project #12-101, Trinity Rock Island. The permit was issued on March 26, 2013.

1. Current Status:

Project costs incurred through March 1, 2014 total \$16,283,814. Based on this amount of the total project costs incurred to date, the project is 25.8% complete. To date, there have been no changes to the project in regard to scope and size.

At this time, the following project components have been completed:

- Site preparation and excavation
- Deep and shallow foundations
- Structural steel
- 80% of the concrete slabs
- Spray fireproofing is underway
- Central utility plant has had new chilled water infrastructure and electrical distribution equipment installed

The following project components remain to be completed:

- Complete placement of concrete slabs and spray fireproofing
- Exterior and interior wall framing and overhead mechanical, electrical, and plumbing rough-in
- Installation of all drywall and final finishes
- Installation of new generator and activation of all utilities
- Installation of all furniture, fixtures, and equipment
- Site work for parking and landscaping

2. Costs incurred to date and itemized listing:

Total costs incurred through March 1, 2014 are \$16,283,814. This leaves \$46,938,160 remaining toward the project's total approved amount. A schedule of project costs is included as Attachment A.

3. The method of financing the project has not changed. See Attachment A for Sources of Funds summary.
4. The most recent Application and Certification for Payment for the construction contract, as per form G702 published by the American institutes of Architects is included as Attachment B.
5. The anticipated date of completion of the project remains unchanged at July 31, 2016.

If we can provide any further information relating to this Annual Cost Report, please contact Nancy O'Dacre, Director of Business Planning and Development at UnityPoint Health – Trinity, at 563-742-2616.

Sincerely,

A handwritten signature in black ink, appearing to read "Jay Willsher". The signature is fluid and cursive, with a large initial "J" and "W".

Jay Willsher, FACHE
Chief Operating Officer

Cc: Mike Constantinou
Janet Scheuerman
Glenn Boardman
Enclosures

Attachment A

Project Number 12-101, Project Costs Annual Progress Report, March 2014	Approved Amount	Costs Incurred to Date	Comparison to the Approved Permit Amount (+/-)
Preplanning Costs	\$893,009	\$893,009	\$0
Site Survey and Soil Investigation	\$39,329	\$48,614	\$9285
Site Preparation	\$2,452,949	\$1,930,000	(\$522,949)
Off Site Work	\$0	\$0	\$0
New Construction Contracts	\$32,420,657	\$7,904,045	(\$25,047,065)
Modernization Contracts	\$2,225,700	\$190,000	(\$2,035,700)
Contingencies	\$3,569,762	\$0	(\$3,569,762)
Architectural/Engineering Fees	\$2,929,254	\$2,400,549	(\$528,705)
Consulting and Other Fees	\$2,584,735	\$1,445,000	(\$1,139,735)
Movable or Other Equipment (not in construction contracts)	\$13,309,729	\$3,139	(\$13,306,590)
Bond Issuance Expense (project related)	\$0	\$0	\$0
Net Interest Expense During Construction (project related)	\$768,820	\$1,016,515	\$247,695
Fair Market Value of Leased Space or Equipment	\$0	\$0	\$0
Other Costs to Be Capitalized	\$2,028,030	\$452,943	(\$1,044,634)
Acquisition of Building or Other Property (excluding land)	\$0	\$0	\$0
Total Project Costs	\$63,221,976	\$16,283,814	(\$46,938,160)
Source of Funds			
Cash and Securities	\$53,221,976	\$16,283,814	\$36,938,160
Pledges	\$10,000,000	\$0	\$10,000,000
Gifts and Bequests	-		
Bond Issues (project related)	-		
Mortgages	-		
Leases (fair market value)	-		
Governmental Appropriations	-		
Grants	-		
Other Funds and Sources	-		
Total Sources of Funds	\$63,221,976	\$16,283,814	\$46,938,160

APPLICATION AND CERTIFICATION FOR PAYMENT

TO (OWNER): TRINITY MEDICAL CENTER 2701 17TH STREET ROCK ISLAND, IL 61201 Attn:	PROJECT: Trinity Heart Center / E. D. Project 2701 17th Street Rock Island, IL 61201 22089	APPLICATION NO: 10 (Tan)	PERIOD FROM: 01/16/2014
CONTRACTOR: Russell/Pepper Const. LLC 643 North Orleans Street Chicago, IL 60654-2833	VIA (ARCHITECT): Cannon Design	PERIOD TO: 02/16/2014	ARCHITECTS PROJECT NO:
CONTRACT FOR: General Construction		CONTRACT DATE:	

CONTRACTOR'S APPLICATION FOR PAYMENT

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Orders approved in previous months by Owner		\$764,252.00	\$0.00
Approved this Month			
C.O. Number			
TOTALS		\$451,505.00	\$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 that current payment shown herein is now due.

CONTRACTOR: Russell/Pepper Const. LLC
By: [Signature] Date: 03/04/2014

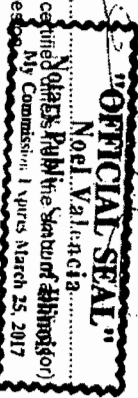
ARCHITECT'S CERTIFICATE FOR PAYMENT

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.

Application is made for Payment, as shown below, in connection with the Contract Continuation Sheet, Schedule of Values, is attached.

1. ORIGINAL CONTRACT SUM..... \$ 338,991,430.00
2. Net change by Change Orders..... \$ 451,505.00
3. CONTRACT SUM TO DATE (Line 1 +/- 2)..... \$ 339,442,935.00
4. TOTAL COMPLETED & STORED TO DATE..... \$ 10,024,045.00
(Column G on Schedule of Values)
5. RETAINAGE:
a. 9 % of Completed Work..... \$ 892,946.00
(Column D + E on Schedule of Values)
b. % of Stored Material..... \$ 0.00
(Column F on Schedule of Values)
Total Retainage (Line 5a + 5b or Total in Column 1 on Schedule of Values)..... \$ 892,946.00
6. TOTAL EARNED LESS RETAINAGE..... \$ 99,131,099.00
(Line 4 less Line 5 Total)
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)..... \$ 8,072,321.00
8. CURRENT PAYMENT DUE..... \$ 1,056,778.00
9. BALANCE TO FINISH, PLUS RETAINAGE..... \$ 30,311,836.00
(Line 3 less Line 6)

State of: Illinois County of: Cook
Subscribed and sworn to before me this 4th day of March 2014
Notary Public:
My Commission expires: 03/04/2014
AMOUNT CERTIFIED: \$ 1,056,778.00
(Attach explanation if amount certified varies from the Schedule of Values)
ARCHITECT: Noel Valancia
My Commission expires: 1 Aprils March 25, 2017
Date: 03/04/2014



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.