



FRESENIUS KIDNEY CARE

Fresenius Kidney Care

3500 Lacey Road, Downers Grove, IL 60515
T 630-960-6807 F 630-960-6812
Email: lori.wright@fmc-na.com

April 27, 2018

RECEIVED

APR 30 2018

HEALTH FACILITIES &
SERVICES REVIEW BOARD

Ms. Courtney Avery
Administrator
Illinois Health Facilities & Services Review Board
525 West Jefferson, 2nd Floor
Springfield, IL 62761

Re: Annual Progress Report. Section 1130.760
Project #17-004, Fresenius Kidney Care Mount Prospect
Permit Holder: Fresenius Medical Care Mount Prospect, LLC, and Fresenius
Medical Care Holdings, Inc.
Permit Amount: \$2,214,231

Dear Ms. Avery:

Enclosed please find the annual progress report which summarizes the status of the above-mentioned project.

If you have any questions, please contact me at 630-960-6807.

Sincerely,

Lori Wright
Senior CON Specialist

cc: Clare Connor



FRESENIUS KIDNEY CARE

April 27, 2018

Annual Progress Report, Section 1130.760

Project #17-004, Fresenius Kidney Care Mount Prospect

Permit Holder: Fresenius Medical Care Mount Prospect, LLC, and Fresenius Medical Care Holdings, Inc.

This report summarizes the status of the above-mentioned project located at 1720 W. Golf Road, Mount Prospect.

Status of the Project

This project is for the establishment of an 8-station ESRD facility in 5,400 GSF with a permit amount of \$2,214,231. The project was obligated with the execution of the lease on August 10, 2017. Interior modernization will be complete by May 31, 2018 with the facility expected to open by June 30, 2018.

Application and Certificate for Payment (AIA G702)

G-702 is attached.

Anticipated Completion Date

The project 90% complete and is expected to be completed prior to the completion date of December 31, 2018.



FRESENIUS KIDNEY CARE

Sources and Uses of Funds

All Project financing to date has been funded from available cash and its equivalents as reported on the company's financial statements. Project costs have not exceeded the approved permit amount.

Project Costs and Sources of Funds

Line Item	Allowance/CON	Realized Costs
Preplanning Costs	N/A	N/A
Site Survey & Soil Investigation	N/A	N/A
Site Preparation	N/A	N/A
Off-site work	N/A	N/A
New Construction Contracts	N/A	N/A
Modernization	955,800	797,173
Contingencies	94,500	0
Architectural/Engineering	102,500	106,104
Consulting and other fees	N/A	N/A
Movable & Other Equipment	265,000	253,353
Bond Issuance Expense	N/A	N/A
Net Interest Expense during Construction	N/A	N/A
FMV of Leased Space & Equipment	796,431	796,431
Other Costs to be Capitalized	N/A	N/A
Acquisition of Building or other Property (excluding land)	N/A	N/A
Total Project Costs	\$2,214,231	
Realized Total Project Costs To Date		\$1,953,061
Cash & Securities	1,417,800	1,156,630
Pledges	N/A	N/A
Gifts & Bequests	N/A	N/A
Bond Issues	N/A	N/A
Mortgages	N/A	N/A
Lease FMV	796,431	796,431
Gov. Approp	N/A	N/A
Grants	N/A	N/A
Other funds and Sources	N/A	N/A
Total funds	\$2,214,231	
Total Spent to Date		\$1,953,061

APPLICATION AND CERTIFICATE FOR PAYMENT

Invoice #: 10005664

To Owner: FRESENUIS MEDICAL CARE
1909 TYLER STREET 8TH FLOOR

Project: 05053- Fresenius Medical Care- Mt,
Prospect, IL

Application No.: 4

Distribution to:

Owner
 Architect
 Contractor

FOUNDA PRINCE
DIV ADMIN

APR 18 18

RECS-North Central
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HOLLYWOOD, FL

Period To: 3/31/2018

From Contractor: Gallant Construction Company Via Architect:
345 Memorial Drive
Crystal Lake, IL 60014

Project Nos: 100632-1DN-W-BO-17

Contract For: Construction Services

Contract Date:

CONTRACTOR'S APPLICATION FOR PAYMENT

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

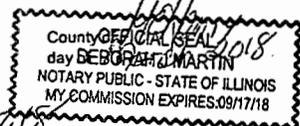
1. Original Contract Sum	\$1,209,600.00
2. Net Change By Change Order	\$4,181.75 ✓
3. Contract Sum To Date	\$1,213,781.75
4. Total Completed and Stored To Date	\$1,117,154.78
5. Retainage:	
a. 10.00% of Completed Work	\$111,715.56
b. 0.00% of Stored Material	\$0.00
Total Retainage	\$111,715.56
6. Total Earned Less Retainage	\$1,005,439.22
7. Less Previous Certificates For Payments	\$697,464.75 ✓
8. Current Payment Due	\$307,974.47
9. Balance To Finish, Plus Retainage	\$208,342.53

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: Gallant Construction Company

By: [Signature] Date: 3-21-18

State of Illinois
Subscribed and sworn to before me this 31
Notary Public: [Signature]
My Commission expires: 9-1-18



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 \$ 307,974.47

(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: _____ Date: _____

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	\$4,181.75	\$0.00
Total Approved this Month	\$0.00	\$0.00
TOTALS	\$4,181.75	\$0.00
Net Changes By Change Order	\$4,181.75	

APPLICATION AND CERTIFICATE FOR PAYMENT

AIA DOCUMENT G702

Page 1 of

TO (OWNER): Fresenius Medical Care PROJECT: Mt Prospect IL FMC 100632
 FROM (CONTR.) Cohen Architectural VIA (ARCHITECT):
 Woodworking
 CONTRACT FOR: Millwork & Installation

APPLICATION NO: 2
 PERIOD TO: Mar 2018
 CONTRACTOR'S PROJECT NO:
 CONTRACT DATE:

Distribution to:
 OWNER:
 ARCHITECT
 CONTRACTOR

CONTRACTOR'S APPLICATION FOR PAYMENT

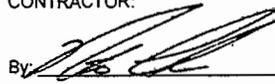
Application is made for Payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Orders approved in previous months by Owner			
TOTAL			
Approved this month			
Number	Date Approved		
TOTALS		0	0
Net change by Change Orders		0	

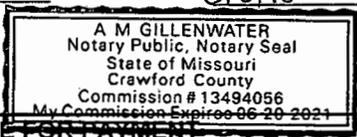
- 1. ORIGINAL CONTRACT SUM \$ 110,787.00 ✓
- 2. Net change by Change Orders \$ -
- 3. CONTRACT SUM TO DATE (Line 1 + 2) \$ 110,787.00
- 4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) \$ 110,787.00
- 5. RETAINAGE:
 - a. 10% % of Completed Work \$ 11,078.70
(Columns D + E on G703)
 - b. 100 % of Stored Material _____
(Column F on G703)
- Total Retainage (Line 5a + 5b or Total in Column I of G703) \$ 11,078.70
- 6. TOTAL EARNED LESS RETAINAGE \$ 99,708.30
(Line 4 less Line 5 Total)
- 7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate) \$ 27,871.20 ✓
- 8. CURRENT PAYMENT DUE \$ 71,837.10
- 9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6) \$ 11,078.70

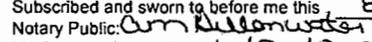
The undersigned Subcontractor certifies that to the best of Subcontractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates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

CONTRACTOR:

By: 

Date: 3/8/18



State of: Missouri County of: Crawford
 Subscribed and sworn to before me this 8 day of March 2018
 Notary Public: 
 My Commission expires: 6/20/2021

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
 (Attach explanation if amount certified differs from the amount applied for.)
 ARCHITECT:

By: _____ Date: _____

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.

NOTICE: PROPERTY OWNERS IMPORTANT INFORMATION
 CONCERNING MECHANICS LIENS ON REVERSE SIDE.