



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

525 WEST JEFFERSON ST. • SPRINGFIELD, ILLINOIS 62761 • (217) 782-3516 • FAX: (217) 785-4111

DOCKET ITEM NUMBER: D-01	BOARD MEETING: June 2, 2015	PROJECT NUMBER: #08-082
PERMIT HOLDERS(S): Rest Haven Illiana Christian Convalescent Home d/b/a Rest Haven Christian Services		
FACILITY NAME and LOCATION: Victorian Village, Homer Glen		

DESCRIPTION: On September 1, 2009, The State Board approved the establishment of a 50-bed general long term care ("LTC") facility located in Homer Glen. The total approved project cost was \$10,697,539. This project was classified as a substantive project.



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STATE BOARD STAFF REPORT
PERMIT ALTERATION REQUEST
Project #08-082

I. Project Description and Background Information

- On September 1, 2009, the State Board approved Permit #08-082. The permit holders were approved to construct 50-bed general long term care (“LTC”) facility in a total of 39,030/GSF of space. The cost of the approved project was \$10,697,539. This project is obligated and the current project completion date is April 30, 2015.
- On April 1, 2015 the Illinois Health Facilities and Services Review Board received a permit alteration request to increase the overall cost of the project. There were no other proposed alterations to the project.

II. The Proposed Alteration

A. The following proposed alterations require State Board approval:

The permit holders are requesting an increase in the cost of the project from \$10,697,539 to \$11,446,366 a \$748,827 increase or 6.9%.

B. Reason(s) for the Proposed Alteration:

The permit holder stated there were a number of reasons why the project costs increased. These include:

- Commonwealth Edison’s request to revise utility services
- Local zoning requests to adhere to “dark sky” lighting ordinances
- Various “construction-related” costs

The permit holders note that there were no changes in project scope or size.



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III. Applicable Rules

77 IAC 1130.750 specifies that a permit is valid only for the project as defined in the application and any change to the project subsequent to permit issuance constitutes an Alteration to the project.

Allowable alterations that require HFPB action are:

- 1) a change in the approved number of beds or stations provided that the change would not independently require a permit or exemption from HFPB;
- 2) abandonment of an approved category of service established under the permit;
- 3) any increase in the square footage of the project up to 5% of the approved gross square footage;
- 4) any decrease in square footage greater than 5% of the project;
- 5) any increase in the cost of the project not to exceed 7% of the total project cost. This alteration may exceed the capital expenditure minimum in place when the permit was issued, provided that it does not exceed 7% of the total project cost;
- 6) any increase in the amount of funds to be borrowed for those permit holders that have not documented a bond rating of "A" or better;
- 7) any increase in the project costs components (i.e., line item amounts) if the increase is not in compliance with the 77 Ill. Adm. Code 1120 review criteria; or
- 8) any change that substantially changes the scope or changes the functional operation of the project, as defined in Section 1130.140.

IV. Summary of State Board Staff Findings

Part 1110 is not applicable to this alteration.

The State Board Staff finds the proposed Alteration appears to be in conformance with all applicable review criteria for Part 1120.



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V. **Projects Costs and Sources of Funds**

Table Two below outlines the costs of the alteration request, reflecting a 7% increase in overall project costs.

TABLE TWO							
Project Costs and Sources of Funds							
Description	Permit Amount			Alteration Request			Difference
	Clinical	Non Clinical	Total	Clinical	Non Clinical	Total	
Preplanning Costs	\$44,000	\$0	\$44,000	\$32,590.95	\$0	\$32,590.95	(\$11,409.05)
Site Survey/Soil Investigation	\$25,000	\$0	\$25,000	\$23,340	\$0	\$23,340.00	(\$1,660.00)
Site Preparation	\$301,000	\$12,000	\$313,000	\$269,234.70	11,218.11	\$280,452.81	(\$32,547.19)
Offsite Work	\$40,000	\$0	\$40,000	\$92,340.45	\$0	\$92,340.45	\$52,340.45
New Construction Contracts	\$6,841,033	\$143,170	\$6,624,203	\$7,638,997.83	\$155,897.91	\$7,794,895.75	\$1,170,692.75
Contingencies	\$599,496	\$0	\$599,496	\$100,420.96	\$0	\$100,420.96	(\$499,075.04)
Modernization	\$0	\$7,000	\$7,000	\$0	\$0	\$0	(\$7,000)
A & E Fees	\$397,500	\$7,500	\$405,000	\$732,272.50	\$14,944.34	\$747,216.84	\$342,216.84
Consulting and Other Fees	\$422,422	\$0	\$422,422	\$360,829.50	\$0	\$360,829.50	(\$61,592.50)
Movable or Other Equipment	\$375,365	\$0	\$375,365	\$393,609.30	\$0	\$393,609.30	\$18,244.30
Loan Origination Fee	\$227,216	\$3,905	\$231,121	\$176,001.14	\$3,591.86	\$179,593.00	(\$51,528.00)
Net Interest Expense During Construction	\$477,152	\$8,200	\$485,352	\$225,934.22	\$4,610.90	\$230,545.12	(\$254,806.88)
Other Costs to be Capitalized	\$1,125,580	\$0	\$1,125,580	\$1,210,532.05	\$0	\$1,210,532.05	\$84,952.05
TOTALS	\$10,515,763	\$181,775	\$10,697,539	\$11,256,103.60	\$190,263	\$11,446,366.73	\$748,827.73
Cash and Securities			\$2,139,508			\$2,888,335.73	\$748,827.73
Mortgage			\$8,558,031			\$8,558,031.00	\$0
TOTALS			\$10,697,539			\$11,446,366.73	\$748,827.73



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Only those criteria that have been altered will be discussed as part of this alteration report. The criteria that will be reviewed are as follows:

- 77 IAC 1125.800 – Availability of Funds
- 77 IAC 1125.800 - Reasonableness of Project Costs

VI. Review Criteria – Economic Feasibility

Criterion 1125.800 – Availability of Funds

In order for the permit holders to increase the cost of the project additional cash of \$ 748,827.73 was required. The applicants stated that there is sufficient cash to fund the alteration.

THE STATE BOARD STAFF FINDS THE PROPOSED ALTERATION APPEARS TO BE IN CONFORMANCE WITH THE AVAILABILITY OF FUNDS CRITERION (77 IAC 1125.800(c)).

C. **Criterion 1125.800(c) - Reasonableness of Project and Related Costs**

The applicant shall document that the estimated project costs are reasonable and shall document compliance with applicable State Board Standards.

Preplanning costs - These costs are \$32,590.95 or less than 1% of construction, contingencies and equipment costs. This is appears reasonable when compared to the approved State Board standard of 1.8%.

Site Survey, Soil Investigation and Site Preparation - These costs total \$292,644.70 or 3.7% of construction and contingency costs (\$7,739,418.79). These costs appear reasonable compared to the approved State Board standard of 5%.

Off Site Work – These costs are \$92,340.45. The State Board does not have a standard for this cost.

New Construction and Contingencies - These costs are \$7,739,418.79 for construction costs and contingencies, or \$198.29 per GSF. This amount appears reasonable when compared to the approved State Board standard of \$200.51 per GSF.

Contingencies - This cost is \$100,420.96, or 1.3% of construction costs. This is appears reasonable compared to the approved State Board standard of 10% or less for new construction.



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Architectural and Engineering Fees - These costs total \$732,272.50, or 9.4% of construction and contingencies. This appears reasonable compared to the approved State Board standard of 4.25%-9.25%.

Consulting or Other Fees - These costs total \$360,829.50. The State Board does not have a standard for these costs.

Movable or Other Equipment – This amount is \$393,609.30, which is \$7,872 per bed (\$393,609.30/50 beds = \$7,872). This cost appears reasonable compared to the approved State Board standard of \$7,983.11 (Year 2015) per bed.

Net Interest Expense During Construction – This amount is \$225,934.22. The State Board does not have a standard for these costs.

Loan Origination Fee – These costs total \$176,001.14. The State Board does not have a standard for these costs.

Other Costs to be Capitalized - These costs total \$1,210,532.05. The State Board does not have a standard for these costs.

THE STATE BOARD STAFF FINDS THE PROPOSED ALTERATION APPEARS TO BE IN CONFORMANCE WITH THE REASONABLENESS OF PROJECT COST CRITERION (77 IAC 1125.800(c)).

D. Criterion 1125.800(d) - Projected Operating Costs

The applicant state this cost will be \$261.00 per patient day. The State Board does not have a standard for this cost.

THE STATE AGENCY FINDS THE PROPOSED PROJECT APPEARS TO BE IN CONFORMANCE WITH THE PROJECTED OPERATING COSTS REVIEW CRITERION (77 IAC 1125.800 (d)).

E. Criterion 1125.800(e) - Total Effect of the Project on Capital Costs

The applicant state this cost will be \$59.00 per patient day. The State Board does not have a standard for this cost.

THE STATE AGENCY FINDS THE PROPOSED PROJECT APPEARS TO BE IN CONFORMANCE WITH THE TOTAL EFFECT OF THE PROJECT ON CAPITAL COSTS REVIEW CRITERION (77 IAC 1125.800 (e)).



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APR 01 2015

HEALTH FACILITIES &
SERVICES REVIEW BOARD

Via Overnight Carrier

Ms. Kathryn J. Olson
Chair
Illinois Health Facilities and Services Review Board
525 W. Jefferson Street--2nd Floor
Springfield, IL 62761

March 31, 2015

Re: Request for Permit Alteration -
Victorian Village Skilled Nursing Facility
Project No. 08-082 (the "Project")

Dear Chairwoman Olson:

We are asking the Board's approval for a Permit Alteration to increase Project cost. Providence Life Services has not previously requested a permit alteration.

The Illinois Health Facilities and Services Review Board previously granted a permit ("Permit") to construct a 50-bed long term care facility on our existing Victorian Village retirement community in Homer Glen. The Board has subsequently approved permit renewals to April 30, 2015. We are compiling outstanding statements reconciling invoices and negotiating with contractors and vendors. In preparing to make payments to contractors and vendors it appears we will need a permit alteration.

Providence Life Services requests to increase Project costs by 7%. The increased construction costs are for various reasons, including Com Ed request to revise utilities, requests by local government entities to include "Dark Sky" Lighting Ordinances as part of the permitting, and certain other construction related costs. There is no change in the scope or size of the project.

Application Review Criteria

1. § 1120.120 Availability of Funds

The method of financing the Project remains a combination of equity and debt. The increased Project Costs are to be financed solely from equity/cash on hand and we confirm that we have sufficient financial resources to complete the Project.

2. § 1120.130 Financial Viability

The source of financing remains a combination of debt and equity. There will be no increase in the amount of debt. Costs associated with the permit alteration will be paid solely from cash on hand that we confirm is available.

18601 North Creek Drive, Suite A · Tinley Park, Illinois 60477
708.342.8100 phone · 708.342.8000 fax · www.providenceliveservices.com

PROVIDENCE LIFE SERVICES IS A CHRISTIAN 501(C)(3) NOT-FOR-PROFIT ORGANIZATION

With You, for You!

3. § 1120.140(c) Reasonableness of Project Cost

The sole change requested in this permit alteration is to increase the project costs in Off-Site Work, New Construction Contracts, Architectural/Engineering Fees and Movable and Other Equipment. We are requesting a 7% increase, which will allow us to maintain \$100,420.00 in the Contingency line item to be use while we reconcile change orders and negotiate with the contractor and other vendors.. The cost increases for this Project are largely attributable to the following items:

Off-Site Work;

Com Ed Relocation

As part of the construction process we worked with Com Ed regarding the location of Com Ed's transformer, other equipment and Service Feeds. Our Electrical Engineer originally sited Com Ed's approval for its drawings/equipment however as part of a subsequent on-site visit Com Ed required that the equipment be relocated and service continue and loop back to main thoroughfare. This relocation cost increased the contractors work expense and Com Ed agreements. Total cost related to the Com Ed relocation totals \$52,340.45, is attributable to off-site work and additional cost related to construction contracts.

New Construction Contracts;

Bids Higher Than Anticipated -

Due to unexpected delays on the project related to financing, local permitting issues, the harsh winter of 2013-2014, related construction delays, labor cost increases and due to subcontractor requests for additional information not clearly addressed in the architects drawings, we incurred additional costs due to the increased costs to the contractors work expense.

Omitted Items -

During the construction process of the Project it was discovered that several items had been omitted in cost estimates for the permit application. In particular, it was discovered that "dark sky" lighting requirements, appliance requirements to meet open kitchen design criteria, voice data communications backbone equipment needs and various Electrical/Mechanical conflicts not addressed in architectural drawings. These items fell between the gaps as to what was prepared by the architects and what was included as costs to be paid outside the construction contract by Providence Life Services ("PLS") or the "Applicant". Inclusion of these necessary items increased costs to the contractors work expense.

Architectural/Engineering Fees;

F) Architectural/Engineering Fees

During the Design Review phases with IDPH it became evident to us the Architect hired needed to be replaced. Unfortunately "PLS" was still responsible for costs associated with the work provided which had a negative impact on the total costs had associated with this scope of the project. While PLS and its new architect set out to maintain the budgeted line item, the costs incurred due to design clarification, the extended duration of the project and additional oversight needed by the architect, additional fees/costs were incurred.

Moveable and Other Equipment, Costs to be capitalized;

Similar to our Omitted items, it was discovered that items such as stand-alone hydro therapy tubs, laundry equipment and custom shower seats had been missed in cost estimates for the permit application. Additionally certain capitalized costs increased as well. These items fell between the gaps as to what was to be provided by the contractor vs. the Applicant. Inclusion of these necessary items increased costs to the Movable and Other Equipment expense as well as Capitalized Costs.

Thankfully, other line items have met or bettered the budget allowing us to compensate for some of the overages. In particular, interest rates fell considerably since the original permit application was filed. In addition we have utilized the previously budgeted contingency to offset overages. Now, given the complexity and duration of the project we have reserved a contingency of \$100,420.00 to properly close the project out with the contractor and our own operation purchases to ensure the Projects completion.

4. § 1120.140 (e) Total Effect of the Project on Capital Costs

A revised pro forma showing Project cost per patient day as a result of this permit alteration is attached, although there is no review standard. See Included ECON-5.

Project Costs

The Project is requesting Permit Alteration due to Increased Project Costs. See the Project Cost Tables detailed and included herein. A revised ECON-4 page is also attached showing the Project cost detail.

We are enclosing a check in the required amount for the application processing fee. We are available to address questions related to this request. Please contact me or our counsel Joe Ourth (312-876-7815) if we can be of assistance. We look forward to continuing to work with you on this Project.

Sincerely,

Jeffrey S. Courtney

Jeffrey S. Courtney

V.P. of Development/Construction

cc: Joe Ourth

112337007.2

Victorian Village
 Project 08-082
 Summary of Project Costs

	Approved CON			7% CON Alteration Requested			Total Permit Adjustments
	Skilled Permit Approval	Non-Clinical Permit Approval	Permit Total	Skilled Permit Approval	Non-Clinical Permit Approval	Permit Total	
Preplanning Costs	\$ 44,000.00	\$ -	\$ 44,000.00	\$ 32,590.95	\$ -	\$ 32,590.95	\$ (11,409.05)
Site Survey and Soil Investigation	\$ 25,000.00	\$ -	\$ 25,000.00	\$ 23,340.00	\$ -	\$ 23,340.00	\$ (1,660.00)
Site Preparation	\$ 301,000.00	\$ 12,000.00	\$ 313,000.00	\$ 269,234.70	\$ 11,218.11	\$ 280,452.81	\$ (32,547.19)
Off Site Work	\$ 40,000.00	\$ -	\$ 40,000.00	\$ 92,340.45	\$ -	\$ 92,340.45	\$ 52,340.45
New Construction Contracts	\$ 6,481,033.00	\$ 143,170.00	\$ 6,624,203.00	\$ 7,638,997.83	\$ 155,897.91	\$ 7,794,895.75	\$ 1,170,692.75
Contingencies	\$ 599,496.00	\$ -	\$ 599,496.00	\$ 100,420.96	\$ -	\$ 100,420.96	\$ (499,075.04)
Modernization	\$ -	\$ 7,000.00	\$ 7,000.00	\$ -	\$ -	\$ -	\$ (7,000.00)
Architectural/Engineering Fees	\$ 397,500.00	\$ 7,500.00	\$ 405,000.00	\$ 732,272.50	\$ 14,944.34	\$ 747,216.84	\$ 342,216.84
Consulting and Other Fees	\$ 422,422.00	\$ -	\$ 422,422.00	\$ 360,829.50	\$ -	\$ 360,829.50	\$ (61,592.50)
Movable or Other Equipment	\$ 375,365.00	\$ -	\$ 375,365.00	\$ 393,609.30	\$ -	\$ 393,609.30	\$ 18,244.30
Bond Issuance Expense / Loan Origination Fee	\$ 227,216.00	\$ 3,905.00	\$ 231,121.00	\$ 176,001.14	\$ 3,591.86	\$ 179,593.00	\$ (51,528.00)
Net Interest Expense	\$ 477,152.00	\$ 8,200.00	\$ 485,352.00	\$ 225,934.22	\$ 4,610.90	\$ 230,545.12	\$ (254,806.88)
Other Costs to be Capitalized	\$ 1,125,580.00	\$ -	\$ 1,125,580.00	\$ 1,210,532.05	\$ -	\$ 1,210,532.05	\$ 84,952.05
Total Project Cost	\$ 10,515,764.00	\$ 181,775.00	\$ 10,697,539.00	\$ 11,256,103.60	\$ 190,263	\$ 11,446,366.73	\$ 748,827.73

7% Project Cost Increase \$ 748,827.73

PROJECT USES AND SOURCES OF FUNDS: NON-CLINICAL	
USE OF FUNDS	AMOUNT
Preplanning Costs	\$ -
Site Survey and Soil Investigation	\$ -
Site Preperation	\$ 11,218.11
Off Site Work	\$ -
New Construction Contracts	\$ 155,897.91
Contingencies	\$ -
Modernization Contracts	\$ -
Architectural/Engineering Fees	\$ 14,944.34
Consulting and Other Fees	\$ -
Movable or Other Equipment	\$ -
Loan Origination Fees	\$ 3,591.86
Net Interest Exp During Construction	\$ 4,610.90
Other Costs to be Capitalized	\$ -
TOTAL USES OF FUNDS	\$ 190,263.13
SOURCES OF FUNDS	AMOUNT
Cash and Securities	
Mortgage	
Total Project Funds	

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PROJECT USES AND SOURCES OF FUNDS: SKILLED NURSING	
USE OF FUNDS	Total
Preplanning Costs	\$ 32,590.95
Site Survey and Soil Investigation	\$ 23,340.00
Site Preperation	\$ 280,452.81
Off Site Work	\$ 92,340.45
New Construction Contracts	\$ 7,794,895.75
Contingencies	\$ 100,420.96
Modernization Contracts	\$ -
Architectural/Engineering Fees	\$ 747,216.84
Consulting and Other Fees	\$ 360,829.50
Movable or Other Equipment	\$ 393,609.30
Loan Origination Fees	\$ 179,593.00
Net Interest Exp During Construction	\$ 230,545.12
Other Costs to be Capitalized	\$ 1,210,532.05
TOTAL USES OF FUNDS	\$ 11,446,366.73
SOURCES OF FUNDS	AMOUNT
Cash and Securities	\$ 2,888,335.73
Mortgage	\$ 8,558,031.00
Total Project Funds	\$ 11,446,366.73

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Victoian Village Project Costs Line Item Components			
Pre-Planning	Skilled	Other	Total
Market Feasibility	\$ 17,172.00		\$ 17,172.00
Pre-Development Expenses	\$ 15,418.95		\$ 15,418.95
Subtotal	\$ 32,590.95		\$ 32,590.95
Site Survey			
Survey & Staking	\$ 23,340.00		\$ 23,340.00
Subtotal	\$ 23,340.00		\$ 23,340.00
Site Preparation			
Site Work & Excavation	\$ 269,234.70	\$ 11,218.11	\$ 280,452.81
Subtotal	\$ 269,234.70	\$ 11,218.11	\$ 280,452.81
Off-Site Work			
Utility Connection/Fees	\$ 92,340.45	\$ -	\$ 92,340.45
Subtotal	\$ 92,340.45	\$ -	\$ 92,340.45
Consulting & Other Fees			
Small House Consultant	\$ 6,000.00		\$ 6,000.00
Interior Design	\$ 8,000.00		\$ 8,000.00
Landscape Architect	\$ 25,000.00		\$ 25,000.00
IHFPB Fees	\$ 5,000.00		\$ 5,000.00
Permitting	\$ 102,400.00		\$ 102,400.00
IT Security Design	\$ 135,000.00		\$ 135,000.00
Legal	\$ 45,429.50		\$ 45,429.50
IDPH Submittal Review Fee	\$ 34,000.00		\$ 34,000.00
Subtotal	\$ 360,829.50	\$ -	\$ 360,829.50
Movable or Other Equipment			
Hydrotherapy Tubs	\$ 67,000.00		\$ 67,000.00
Resident Lifts	\$ 38,000.00		\$ 38,000.00
Medical Refrigerators	\$ 5,000.00		\$ 5,000.00
Shower Seats	\$ 40,000.00		\$ 40,000.00
Laundry Equipment	\$ 11,000.00		\$ 11,000.00
Kitchen Refrigerators	\$ 16,000.00		\$ 16,000.00
Small Appliances	\$ 10,000.00		\$ 10,000.00
CareProdx	\$ 33,000.00		\$ 33,000.00
Televisions	\$ 38,000.00	\$ -	\$ 38,000.00
Medicine Cabinets	\$ 15,000.00		\$ 15,000.00
Induction Stoves	\$ 45,000.00		\$ 45,000.00
Resident Beds	\$ 75,000.00		\$ 75,000.00
Subtotal	\$ 393,000.00	\$ -	\$ 393,000.00
Other Costs to be Capitalized			
		\$ -	\$ -
Décor	\$ 356,032.00		\$ 356,032.00
Information Tech/Security	\$ 309,000.00		\$ 309,000.00
Start Up Costs	\$ 315,000.00		\$ 315,000.00
Development	\$ 120,000.00		\$ 120,000.00
Marketing	\$ 40,000.00		\$ 40,000.00
Temp Access	\$ 10,000.00		\$ 10,000.00
Temp Utilities	\$ 15,000.00		\$ 15,000.00
Misc. Repairs	\$ 15,000.00		\$ 15,000.00
Misc. Expenses	\$ 20,000.00		\$ 20,000.00
Campus Signage	\$ 10,000.00		\$ 10,000.00
Subtotal	\$ 1,210,032.00	\$ -	\$ 1,210,032.00

**Rest Haven Christian Services
Victorian Village Cottages
Projected Operating Costs
& Capital Costs**

Operating Costs:

Wages	\$	1,805,400
Wage Related Costs		473,015
Employee Development		14,300
Acct, Audit, Data Services		8,600
Legal Services		17,400
Therapy, Pharmacy & other Ancillary		1,329,768
Supplies		265,282
Equipment Leasing		3,600
Equipment Maint, Contract		72,000
Utilities		89,900
Insurance		55,200
Other Expenses		13,100
Corporate Services		<u>381,973</u>

Total Operating Costs \$ 4,529,538

Number of Patient Days 16,790

Operating Cost per Patient Day \$ 270

Direct Operating Costs:

Total Operating Costs (per above)	\$	4,529,538
less, Utilities		(89,900)
less, Insurance		<u>(55,200)</u>

Total Direct Operating Costs \$ 4,384,438

Number of Patient Days 16,790

Direct Operating Cost per Patient Day \$ 261

Capital Costs

Depreciation & Amortization	\$	330,544	<u>Revised</u>	\$353,682
Interest	\$	<u>630,285</u>		<u>\$630,285</u>

Total Capital Costs \$ 960,829 \$983,967

Number of Patient Days 16,790 \$ 16,790

Capital Cost per Patient Day \$ 57 \$ 59



Rest Haven Endowment Fund

18601 North Creek Drive
Tinley Park, IL 60477

(708) 342-8100

08-082 Victorian Village

MB Financial Bank
South Holland, IL 60473

002295

DATE

AMOUNT

03/25/2015

\$1,000.00

One Thousand Dollars and 00 Cents

Pay to the Order of:

Illinois Department of Public Health

Health Care Facilities and Program:
525 West Jefferson Street, 4th Floor
Springfield, IL 62761-0001

OPERATING FUND

Bary Vanderkooft

⑈002295⑈ ⑆071001737⑆ ⑈3500038239⑈

Details on back. Security Features Included.