

# Murer Consultants, Inc.



58 North Chicago Street  
7th Floor  
Joliet, IL 60432  
815-727-3355 Telephone  
815-727-3360 Telefax

October 2, 2012

Mr. Dale Galassie, Chairman  
Illinois Health Facilities and Services Review Board  
525 W. Jefferson St., 2nd Floor  
Springfield, IL 32761

**RECEIVED**

**OCT 05 2012**

**HEALTH FACILITIES &  
SERVICES REVIEW BOARD**

Chairman Galassie,

In keeping with 77 Ill. Adm. Code § 1130.720, please accept this letter verifying that Project 12-051 has been obligated as of the obligation date set forth in its Permit Approval Letter.

This letter certifies and attests that the project was obligated prior to receiving the Health Facilities and Services Review Board's approval for a Certificate of Need during the Board's September 11, 2012 hearing. Specifically, DuPage Medical Group, Ltd. had expended at least 33% of the total project cost by that date. Therefore, the project was obligated as of the obligation date listed in the project's approval letter, September 11, 2012.

Furthermore, this letter verifies that the financial resources are available to complete the project and that the project, once completed, will have the same cost, scope, design, square footage and be in all other respects in compliance with that which the Board has approved.

Thank you for your kind attention and assistance in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Cheryl G. Murer'.

Cherilyn G. Murer, JD, CRA  
President & CEO  
Murer Consultants Inc.  
Acting on behalf of DuPage Medical Group, Ltd.

Attachment

I, Dennis Fine, Chief Operating Officer and Authorized Representative of DuPage Medical Group, Ltd. verify and attest that all of the foregoing is true and accurate, that Project 12-051 was obligated on the date stated herein, and that the project is in compliance with that which was approved by the Board.

Respectfully,

*Dennis Fine*

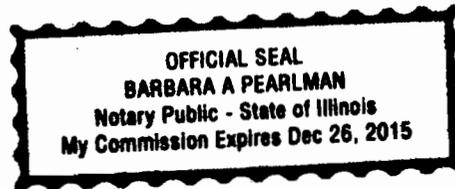
Dennis Fine, COO  
DuPage Medical Group

Notarized and sworn to before me this 28<sup>th</sup> day of September, 2012

*Barbara A. Pearlman*

Signature of Notary

State of Illinois  
County of DuPage



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