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March 2, 2016

VIA FEDERAL EXPRESS

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

RECEIVED

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**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

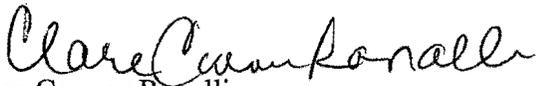
Re: Project #14-033

Dear Ms. Avery:

Please accept this as the permit holder's Hauser Ross Eye Institute Ambulatory Surgery Center's final cost report. The total project cost is as referenced on the attached, and within the approved permit amount. In addition, the project is within the approved scope of the permit granted on October 7, 2014.

Thank you.

Very truly yours,


Clare Connor Ranalli

cc: Ahmed Abdelsalam, M.D.

14-033

The Hauser Ross Eye Institute Ambulatory Surgical Center does hereby certify the attached costs reflect the total costs expended with respect to the project, and there were/are no additional capital costs associated with it. The project cost, square footage, services, etc. are in compliance with the permit issued to it on 10/07/14.

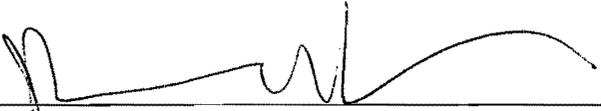
Ahmed Abdelsalam, M.D.

Subscribed and sworn to before me this
___ day of March, 2016.

Notary Public

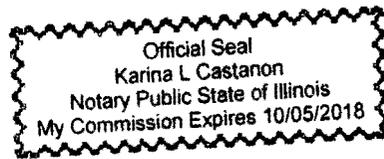
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Ahmed Abdelsalam, M.D.

Subscribed and sworn to before me this
1st day of March, 2016.


Notary Public



Project Costs and Sources of Funds

SURGERY CENTER

Complete the following table listing all costs (refer to Part 1120.110) associated with the project. When a project or any component of a project is to be accomplished by lease, donation, gift, or other means, the fair market or dollar value (refer to Part 1130.140) of the component must be included in the estimated project cost. If the project contains non-reviewable components that are not related to the provision of health care, complete the second column of the table below. Note, the use and sources of funds must equal.

APPROVED

FINAL

CENTER	Project Costs and Sources of Funds			SURGERY	ACTUAL
	USE OF FUNDS	CLINICAL	NONCLINICAL		
Preplanning Costs					
Site Survey and Soil Investigation					
Site Preparation					
Off Site Work					
New Construction Contracts					
Modernization Contracts					
Contingencies					
Architectural/Engineering Fees	\$43,665.00	\$17,835.00	\$61,500.00	\$60,000.00	
Consulting and Other Fees					
Movable or Other Equipment (not in construction contracts)	\$500,000.00	\$150,000.00	\$650,000.00	\$613,872.00	
Bond Issuance Expense (project related)					
Net Interest Expense During Construction (project related)					
Fair Market Value of Leased Space or Equipment*	\$5,904,448.38	\$2,530,477.87	\$8,434,926.25	\$8,434,926.25	
Other Costs To Be Capitalized					
Acquisition of Building or Other Property (excluding land)					
TOTAL USES OF FUNDS	\$6,072,283.38	\$3,074,142.87	\$9,146,426.25	\$9,107,797.25	
SOURCE OF FUNDS	CLINICAL	NONCLINICAL	TOTAL		
Cash and Securities	\$543,665.00	\$167,835.00	\$710,500.00	\$672,872.00	
Pledges					
Gifts and Bequests					
Bond Issues (project related)					
Mortgages					
Leases (fair market value)	\$5,904,448.38	\$2,530,477.00	\$8,434,925.25	\$8,434,925.25	
Governmental Appropriations					
Grants					
Other Funds and Sources					
TOTAL SOURCES OF FUNDS	\$6,072,283.38	\$3,074,142.87	\$9,146,426.25	\$9,107,797.25	
NOTE: ITEMIZATION OF EACH LINE ITEM MUST BE PROVIDED AT ATTACHMENT-7, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.					

*\$5,934,926.25 FMV of Leased Space – Annualized x 15 Year Lease Term
 \$2,500,000.00 FMV of Leased Equipment