The meeting was called to order at 5:30 p.m.

**Members Present**

- Daniel J. Cohn  
- Martha Halko  
- Vicki Smigelski  
- Katherine Collin  
- George Hillow  
- Kristin Warzocha  
- Phyllis Dykes  
- Erin Murphy  
- Michael Bentley  
- Charles Garven  
- Dawn Pyne  
- Brittany O’Connor  
- Jeanine Gergel  
- Laura Rodriguez-Carbone  
- Judith Wright

**Others Present**

- Shannon Strachan, Executive Assistant to Mayor  
- Randell McShepard, Facilitator

1. The group took the first few minutes to enjoy a potluck dinner. Welcome remarks were provided by Erin Murphy, Chair who then introduced Randy McShepherd to facilitate the retreat program.
2. Randy introduced the retreat “ice breaker” by asking the group to pair off with someone they did not know and have a conversation including the following questions. (Name, How long they lived in Lakewood, Favorite Food, Something no one would normally know about them). Each individual was then asked to give a 30 second presentation about their partner.
3. Randy then invited the guests in the room to introduce themselves to the task force. In attendance were: Pam Wetula, Pat Ginley, Dean Dilzell, Bonnie Sykes and _________________.
4. Randy thanked Erin for drafting the proposed task force by-laws and Meeting Norms/Expectation documents and asked that she facilitate a conversation. Erin solicited feedback and comment about the drafts from the task force. Discussions about the bylaws included: consensus building/approval process; quorums; proxy voting and virtual attendance. It was agreed:
   a. Quorum would be 75% of the task force and would include members who attended by phone.
   b. Approval process would seek full consensus. If there was not full consensus, approval would require a vote of at least 9 members of the task force.
   c. Proxy voting would not be accepted, but attendance by phone would allow that member to vote.
A discussion about the Norms/Expectations for meetings was had and resulted in the following recommendations:
   d. Add an expectation about public comment protocol and structure.
   e. Add an expectation about providing meeting agendas and materials at least five (5) days prior to a meeting whenever possible.
   f. Add an expectation to provide a schedule of meetings for the next 12 months as possible.
   g. Add an expectation that member comments should be concise and thought out in order to keep meetings moving.
   h. Add an expectation that all members speak at a consistent volume so all members and visitors may hear the conversation.
5. Randy McShepard next addressed the task force members to present the survey results on the questions posed to them. A copy of the questions and the survey results are attached.
6. Randy McShepard asked the task force members to provide their reactions to the survey results. A general discussion and opportunity for comments from the task force ensued. A summary of
the recommendations and key themes from this discussion were captured by R. McShepard on a flip-chart and consolidated in the attached notes.

7. The foundation payment schedule was summarized by C. Garven. There were no further questions at that time. A copy of the payment schedule previously provided to the members was also distributed at the meeting. (Copy attached)

8. Randell McShepard next led the group through a discussion about prioritizing the gathering information about the health needs of the Lakewood community through stakeholders. The task force understood that determining the health needs should include a review of the Community Health Assessments, but should also include first hand reporting by organizations and individuals serving the community in a health and wellness capacity. The group agreed that the first groups they would reach out to for the next June meetings would be:
   a. June 14, 2017 Meeting - City of Lakewood Human Services and possibly Dr. Hekman and Dr. Welsh from CCF
   b. June 27, 2017 Meeting –Cuyahoga County Board of Health and the Center for Health Affairs

9. Erin Murphy addressed the group with a recommendation that a subcommittee get together to develop a framework of questions to ask the various stakeholders being invited in to present and answer questions. In addition Erin and Randy both recommended that a more concise list of the stakeholders be prepared. Erin asked for volunteers for a “Community Engagement Subcommittee”. Michael Bentley, Dan Cohn, Phyllis Dykes and Martha Halko stepped forward to sit on this subcommittee and agreed to try to meet prior to the June 14, 2017 meeting of the full task force. M. Halko suggested that the subcommittee consider a framework used by the county:
   a. What is the problem?
   b. What are the solutions?
   c. What does it matter to us?
   d. Where are the gaps?
   e. Who is doing what?

10. Randy McShepard then asked the visitors at the meeting if they had any public comment:
   a. Pat Ginley encouraged the group to include addressing the difficulties and issues of “seniors aging in place” in Lakewood and looking at the use of “digital monitoring” for seniors to assist with their ability to “age in place.”
   b. Bonnie Sykes recommended that the use of the city “water bill” is an effective means of disseminating information to the general Lakewood community and encouraged its use for the task force communications.
   c. Dean Dilzell made some general comments about the funding time-line for the foundation and then encouraged that the foundation task force not forget issues such as “lead poisoning” as an area of health and wellness to be addressed.
   d. __________ recommended that the task force ask the various stakeholders what they think the role of the foundation should be from their perspective.

11. Action Items:
   a. Shannon Strachan to reach out to City of Lakewood Human Services and Dr. Hekman and Dr. Welsh to determine their availability on June 14, 2017.
   b. Judy Wright to reach out to Kirsten Cracius at the Center for Health Affairs to determine the availability of Kirsten or another representative on June 27, 2017.
   c. Community Engagement Subcommittee to meet and develop standard questions for stakeholders and a concise list of stakeholders.
   d. Randell McShepard to summarize the task force recommendations from the survey discussion.
   e. Erin Murphy to revise the Bylaws and the Meeting Expectations/Norms for review, final comment and approval at the next meeting.

12. Meeting was adjourned at approximately 9:00 p.m.
Foundation Planning Task Force
Retreat Documentation

1. Meeting Agenda
2. Survey Questions and Survey Responses
3. Draft Bylaws and Meeting Expectations/Norms
4. Retreat Notes and Key Themes Summary from Flip Chart – R. McShepard
5. Foundation funding schedule
Lakewood Foundation Planning Task Force

Planning Retreat

May 30, 2017

Women's Pavilion at Lakewood Park – 5:30 pm to 9:00 pm

AGENDA

I. Welcome

II. Ice Breaker/Team Building Exercise

III. Review of Bylaws/Committee Expectations Document

IV. Meeting Norms

V. Survey Results (Discussion)

VI. Overview of Dissolution of Funds and Foundation Payment Schedule

VII. Prioritization of Stakeholder Presentations at Future Meetings

VIII. Other Business

IX. Public Comments

X. Adjournment
Questions from Randy in preparation for Foundation Planning Task Force Retreat

1) What, in your opinion, should be the focus of the Wellness Foundation?

2) Who are the key community stakeholders that should be interviewed (organizations, groups, individuals, etc.).

3) Which expert opinions or perspectives should be brought before the Task Force for presentations and Q&A?

4) What is the biggest mistake the Task Force can make that you would hope to avoid?

5) What would be a successful outcome for this overall process?

(All responses should be fairly brief!)
Survey Results

1) What, in your opinion, should be the focus of the Wellness Foundation?

- Health and wellness for the Lakewood community, as broadly construed as possible.
- The Wellness Foundation should focus on leveraging resources currently in Lakewood in an effort to maximize community benefit. The Foundation could serve as a convener and facilitator of these efforts.
- The efforts should have a goal of making the healthy choice easy in Lakewood. Similar to the rest of the country, chronic disease, poor diets and inactivity are major contributors to poor health outcomes.
- I hope the wellness foundation focuses on filling gaps that exist in our safety net that keep people from obtaining health, especially social services that address the social determinants of health, e.g. healthy housing, transportation, food access, etc.
- The Lakewood Community Wellness Foundation should be a public charitable giving organization with a focus on self-sustainability and non-profit capacity building. The Foundation should work to connect those who care about our community with the organizations and non-profits who are, or want to do the most good for the people who reside here. The Foundation could serve as a conduit, working to help organizations make a philanthropic impact by matching those goals with local needs and opportunities. Non-profits would be able to apply for discretionary grants to implement programs the Board of Trustees deems beneficial to the wellness of the community.
- Acquiring money for various community needs WITHIN Lakewood’s borders. These needs could be addiction and wellness education. Grants for wellness could be disbursed based on applications from various community members and groups.
- Support programming that helps: Decrease frequency of preventable disease; Abate burden of existing disease; and Increase “wellness” in the community (perceived and actual).
- To be responsive to the needs of the Lakewood community and residents. It should be complimentary but not duplicative of currently resourced health and wellness efforts and seek to align priorities and resources in an effort to maximize the use of resources and overall impact in the community. Also consider and value ALL racial, ethnic and other groups while understanding the differences in opportunities among residents and the associated differences in rates of health conditions and health outcomes. Evaluate root causes and implications for institutions, systems and policies.
• The Wellness Foundation should support the overall health of the citizens of Lakewood. I would like to see it supporting innovative programs that think outside the box. I struggle with where to begin knowing what these programs might be but I would like to see them addressing social determinants of health, housing, nutrition (food insecurity), jobs, education, transportation, safety, among others. My concern is finding organizations seeking grants (if the chosen model) to provide the programs we’re envisioning and that will make a difference.

• I think its premature to answer this question until the task force reviews all of the information and arrives at a shared understanding of the array of challenges this community faces or a sense of prioritization.

• Not completely sure right now. For now I would say grants for tangible needed services, with need being defined by an agreed upon source. A wellness educational grant component, perhaps with a focus on children. And maybe a small wellness “think tank” grant component.

• I’d love to see the Wellness Foundation’s focus be holistic with a focus on advancing health equity, ensuring health access, and addressing root causes of health disparities through a racial and economic justice framework.

• Determining how to make a positive improvement on the CHNA score as identified in the needs categories. Based on Lakewood’s high score, I’m looking for high impact in a short time, with less of a focus on the longevity of the foundation.

2) Who are the key community stakeholders that should be interviewed?

-Lakewood Hospital Foundation*****
-Save Lakewood Hospital Group*****
-Residents****
-Mayor’s Office***
-Schools***
-City Council**
-Lakewood Community Services Center**
-CCF Lakewood Family Health Center (incoming leadership)**
-Focus groups at the senior center and seniors**
-Northcoast Health**
-City Departments*
-Lakewood Department on Aging*
-Recovery Resources*
-Health and social service providers*
-Lakewood Alive*
-Youth (including those who participate summer feeding programs)*
-Lakewood Health and Human Services
-Lakewood Chamber
-Lakewood Family Room
-Lakewood Y
- Turkish Cultural Center
- Refugee Serving Organizations
- Live Well Lakewood Group
- Build Lakewood
- Any agency working in the health realm; i.e. other non-profits or foundations, health-care organizations, Depts. of Public Health, churches, city administration.
- Community program leaders who currently guide health and wellness efforts in Lakewood and could align with Foundation efforts
- Other non-profits with expertise in the Lakewood area
- A person who knows and understands the plans for the new Wellness Center
- Hospital representatives
- Lakewood-based or focused philanthropic entities
- Young families
- Dottie Buckon
- Toni Gelsomino
- Pam Smith (Build Lakewood Chair, former City Council member, volunteer)
- Tom Monahan (Save Lakewood Hospital)

3) Which expert opinions or perspectives should be brought before the Task Force for presentations and Q&A?

- Lakewood Hospital Foundation
- Founding staff/boards of other healthcare conversion foundations in the area such as St. Lukes, Mt. Sinai, Sisters of Charity (or nationally) to compare notes
- County Board of Health
- Public Health and other agencies focused on these issues
- CCF Lakewood Health Center
- Lakewood Office on Aging
- Fairview Hospital (Community Health Assessment Rep)
- Barberton Community Foundation (or another local conversion Foundation)
- Potentially academics and/or the Center for Community Solutions to review data about Lakewood human services needs
- Philanthropy Ohio, Center for Effective Philanthropy or some other organization might provide broader experience about best practices in philanthropy
- Someone who can help us define our legal and regulatory structure (attorney) - Relatedly, we need to make sure that we are compliant and on track to receive our non-profit status so we can operate
- Physicians and Mental Health Professionals (Opioid Addiction)
- Huron Foundation Board Members
- Rolly Standish, CPA and expert on non-profits
- Population Health Management Experts
- Advocates doing health interventions in Lakewood (or similar communities) for a frame of reference
o Health Equity Funders
 o A consultant that worked on Community Health Needs Assessment
 o Residents
 o Legal support
 o Denise Zeman

4) What is the biggest mistake that the Task Force can make that you would hope to avoid?

 o Duplicating efforts.*
 o Not getting input from Lakewood Hospital Foundation or Save Lakewood Hospital – goal is to be as inclusive as possible and give voice to all residents.
 o Too narrowly defining what is health and wellness.
 o Too narrowly defining our constituency that we are unable to give out funds to deserving organizations/programs/projects.
 o Not having a realistic view of the dollars that will be received by the foundation (need to be smart about the money that is available).
 o Putting money toward initiatives that are not sustainable, i.e. “one-shot programs” - I hope we don’t assume that this will be a foundation that sits on a pile of cash and doles out 5% of it per year. There are other options that might involve spending down assets sooner that should be on the table.
 o Privatizing the foundation would limit community buy-in and negatively impact its potential growth.
 o Spend the money down quickly or give another organization control over the money. We need to make this an endowment FOR the community and have it benefit the community. I would propose a specific percentage of the previous year’s assets (i.e. 3.5%) which would account for growth and sustainability for years to come.
 o Create a structure that consumes a high percentage of foundation funds, limiting community benefit.
 o To not consider emerging and innovative approaches to population health improvement that are grounded in equity. In addition, to not consider a balanced approach, which includes short-term and long-term priorities and programs.
 o Not being relevant. There are so many problems in our society and although it’s not a lot of money, I believe its enough to make a difference.
 o Defaulting to easy solutions. All possibilities should be explored.
 o Focusing on health/wellness challenges that impact only a subset of the population. Lakewood is diverse, so focusing on one subgroup does not keep with the original purpose of the assets.
 o Avoid setting up a foundation that simply duplicates what other philanthropic dollars are already doing in Lakewood. This foundation should expand the pie of resources available to serve Lakewood residents rather than displace other resources already flowing into this community.
- Forgetting that Lakewood was almost evenly split on the most recent hospital vote. Not working for inclusion of all constituencies during the planning process.
- Being arrogant toward non-supporters or even supporters.
- Fail to consider how race and class impact health. Limit solutions to direct health interventions only rather than considering policy and advocacy approaches as well as direct health interventions.
- Not staying in our lane.
- Not health-score metric driven
- I would like to see us focus on the needs of the underserved, chronic conditions, etc. over “wellness”.

5) **What would be a successful outcome for this overall process?**

- A strong majority (60%+) of Lakewood residents are satisfied with the new Foundation and its mission/vision.

- To have a dedicated group involved with the foundation to carry out efforts and make Lakewood one of the healthiest communities in the country.

- The people who ultimately decide the foundation’s structure listen to the Task Force because the Task Force’s recommendations are thoughtful, data-driven and include buy-in from multiple community stakeholders of different opinions.

- To establish an administrative structure that will enable the Board of Trustees to make impactful decisions about identifying potential funding opportunities to benefit our residents, and to develop a regulatory structure that will instill public confidence in the Foundation’s efforts and show its capability to add public value.

- For there to be a foundation created that will be transparent and work on behalf of Lakewood for many years to come.

- Create a foundation that will find programming that impacts health of the people in this community in measurable ways.

- Decrease frequency and burden of disease.

- Increase perceived and actual good health.

- Benefits are clear to the citizens of the community.

- The Wellness Foundation is established through a thoughtful, inclusive and strategic process and ultimately considers equity as it provides resources to meet the identified needs of the Lakewood community.

- The establishment of a foundation with a diverse and talented board, possibly an
advisory board, that makes a real difference in the lives of everyone living in Lakewood. Let's be groundbreakers!

-There are many health needs this Foundation could address, and I am confident that through this process we will be able to prioritize and choose one or several that merit the resources at stake.

-It would be excellent if we could also bring the community together in healing after all of the divisiveness of the hospital closure as a part of this process.

-A clear non-duplicative mission and grant options, general agreement that we really tried to include diverse constituencies, paperwork that meets legal requirements and a board that is diverse in every important way possible.

-Clarity on mission, vision and purpose of foundation. Clarity on potential funding focus and strategy.

-Lakewood's needs categories are (1) Chronic Disease, 2) Access to Affordable Care, 3) Access to Community Services, and 4) Economic and Community Development. It may be helpful to align synergies with other community resources and centralize access to the residents who need these services most.
ARTICLE I – NAME AND PURPOSE

Section 1 – Name

The name of the committee is Foundation Planning Task Force.

Section 2 – Purpose

The purpose of the committee is to recommend the process for creation of a new foundation focused on addressing community health and wellness needs in the city of Lakewood.

ARTICLE II – MEMBERS, & ROLES

Section 1 – Member Appointment

Members are appointed by regulators, City of Lakewood.

Section 2 – Expectations of Task Force

The task force’s role is to support and facilitate:

1. Determination of mission, scope and governance of new foundation
2. Establishment of a plan for ongoing community involvement in foundation, which may include review, planning, and proposal of Community Advisory Committee and Board of Trustee structure
3. Drafting of new foundation’s governing documents
4. Engagement of community in gathering input on proposed mission and practices of new foundation

Section 3 – Compensation

Task Force members will receive no compensation directly for participation in the task force, except administrative support or expense reimbursement in relation to duties.

Section 4 – Terms of Service

All members are expected to commit to the task force for at least one year. The role of the task force will cease upon completion of mission stated above.

Section 5 – Meetings and Notices

Task Force members should expect to meet at a minimum of once per month, though additional monthly meetings may be necessary. Notices of all Task Force meetings will be made public in accordance with Ohio Open Meeting Requirements. Notices of meetings should be sent to recorder at least 7 days in advance of scheduled meeting.

Section 6 – Task Force Member Meeting Roles
A Chair and Vice Chair will be appointed by the Task Force. The role of the chair is to preside over meetings and ensure task force effectiveness and engagement for timely completion of tasks. The role of the Vice Chair is to perform the duties of Chair in the case of absence or disability of the Chair.

A recorder will take notes on the decisions made and keeps things going on schedule so that each agenda item can be covered in the time allotted. If an item cannot be finished in the time allotted, the recorder will seek consensus on whether to proceed or table the discussion for next meeting.

Section 7 – Decision Making Procedure

Need input – Quorum

A quorum of at least 75% of members must be in attendance at meetings for changes to occur in the program plan and decisions to be made.

Decision Making Procedures

Consensus decision-making: The input and ideas of all participants are gathered and synthesized to arrive at a final decision acceptable to all.

Elements of a consensus based decision

- All parties agree with the proposed decision and are willing to carry it out
- No one will block or obstruct the decisions or its implementation

Levels of Consensus

-a firm “yes”
- I can accept the decision
- I can live with the decision
- I do not fully agree with the decision, however I will not block it and will support it

Modified consensus approach: “Consensus-Minus-One” means that it takes more than one dissenting member to block consensus. OR attempt consensus first. If not possible, motion for majority vote

Robert’s Rules of Order approach: With a quorum present, a majority vote is sufficient for adoption of a motion, or in some cases, a two-thirds vote.

?Special situations….when voting on a committee position (i.e. chair, vice chair, etc)

Section 8 – Attendance

All Members shall regularly attend meetings. When not in attendance, members should submit their comments prior to the meeting they cannot attend. Members who do not regularly attend meetings should discuss the reasons with the Chair.

Section 9 – Resignation
Resignation of any member from the task force must be in writing and received by the City of Lakewood.

Section 10 - Removal of Member from Task Force

Task force member may, at any time, be removed from the task force for not abiding by the rules set forth in this document. A consensus must occur in order to remove a member from the task force.

ARTICLE III – SUBCOMMITTEES

At any time the task force may see it fit to establish subcommittees to work on a specific initiative. When a subcommittee is established, a subcommittee chair will be specified and be responsible for reporting back to the chair and the task force. A subcommittee may request the participation of a non-member. In this case that person will serve on the subcommittee on an ad-hoc basis.

ARTICLE IV – AMENDMENTS

Section 1 – Amendments

These rules may be amended when necessary so long as there is a two-thirds majority vote. Proposed amendments must be submitted to the Chair prior to a meeting.

CERTIFICATION OF RULES

______________________________________

Date
Lakewood Foundation Planning Task Force

**Recommended Meeting Norms**

- Start and end meetings on time
- Turn cell phones off or to silent mode
- Actively listen
- Ask questions
- Encourage full group participation
- Value each other’s opinions
- Uphold task force decisions (unified voice)
Lakewood Foundation Planning Task Force

Meeting Notes and Key Themes - May 30, 2017

Recommendations

- Allow stakeholders to set the agenda.

- Find out which organizations are out there (especially in Lakewood) and understand what they are doing that is making an impact. Learn who's doing good work now!

- Engage residents for input.

- Determine how “health success” will be determined.

- Develop a general framework for a long-term health strategy.

- Rely on the community to educate the task force as well as other stakeholders.

- Potential Areas of Focus:

  - Social Determinants of Health
  - Prevention Measures and Strategies
  - Costs Analysis of Chronic Disease
  - Greatest Areas of Need in Lakewood
  - Public Policy, Systems and Advocacy
  - Overall State of Public Health
  - Equity/Impact of Race on Health Outcomes
  - Opioid Crisis
  - Diabetes
  - Trauma
  - Mental Health

- Other Suggestions:

  - Allow for ongoing learning opportunities for the Task Force and use meetings to educate the group on various health and wellness issues and the implications for Lakewood.

  - Figure out how to help the public to understand the aims of the wellness initiative and how it will (and will note) fill the perceived gaps of the closed hospital.
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*Estimated commencement date for the Family Health Center opening is June, 2018. June 1, 2018 has been used as the estimated commencement date. Remaining funding dates are based on this initial commencement date.