

# Corporate Accountability for Tax Expenditures Act 93-552

## Annual Project Progress Reports for 2015

LAB Development, LLC

Buffalo Grove

### I. Development Assistance Agreements Awarded in 2011

	Assistance Amount	Agreement Number
EDGE Tax Credit	95,397.07	11 ZCA671

### II. Organization/Project Site Information

Chief Officer or authorized designee	Michael Nuccio
Title	CFO
Address	1700 Leider Lane - Suite 100
	Buffalo Grove, IL 60089
	USA
Phone	(847) 499-8303
E-mail	mnuccio@connexiones.com
Standard Industrial Classification Number (SIC#)	5063
North American Industry Classification System (NAICS)	423610

III. Did the recipient's use of the State Funding reduce employment at any other site in Illinois? No



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### Number of Jobs Stated in the Agreement that would be Retained at the Site as a Result of Assistance

Job Classification	Avg Annual Salary	Positions	Full-Time	Part-Time	Temporary
Management	84941.00	4	4	0	0
Sales / Sales Support	77810.00	16	16	0	0
Operations / Admin	37933.00	12	12	0	0
<b>Totals:</b>		<b>32</b>	<b>32</b>	<b>0</b>	<b>0</b>

### Number of Full-Time Permanent Employees Anticipated To Be Hired at this Site on 12/31/2015

Job Classification	Anticipated Starting Dates	Number of Positions to be Hired in this Category	Average Annual Wage per New Employee	Total New Payroll to be Created
NONE		0	\$0.00	\$0.00
<b>Totals:</b>		<b>0</b>		<b>\$0.00</b>

### Job Creation Data Explanatory Notes

If the change (gain/loss) in the number of full-time permanent employees as of the date of the report plus the number of full-time permanent employees anticipated to be hired after date of the report does not equal the number of full-time permanent employees stated in the Agreement that would be created at the site as a result of the assistance, then please explain why not:

The success of the project has allowed us to create more jobs than originally anticipated.

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**Buffalo Grove**

I, Michael Nuccio, as the chief officer or authorized designee of the recipient, verify that the information in the progress report contains no knowing misrepresentation of material facts upon which eligibility for development assistance is based. I further certify that, to the best of my knowledge, the recipient is in compliance with the development assistance agreement(s) between, or on behalf of, the recipient and the Illinois Department of Commerce and Economic Opportunity and/or the Illinois Department of Transportation and/or the office of the Illinois State Treasurer

**Signature on File**

\_\_\_\_\_  
Signature

**5/11/2016**

\_\_\_\_\_  
Date

**CFO**

\_\_\_\_\_  
Title