La Crosse Center Expansion & Renovation

Monthly Summary: December 2020

La Crosse, Wisconsin

ISG

LA CROSSE CENTER

KRAUS-ANDERSON® Construction Company

KRAUS-ANDERSON®

Kraus-Anderson Construction Company
151 E Wilson Street, Suite 100, Madison, WI 53703

January 5, 2021

As we conclude the month of December and start working into January, this report details some of the major site activities completed through this month. There is also a brief list showing the activities we will have upcoming in the month of January. Attached is the overall project schedule, a graph representing the average number of onsite workers per month, and some pictures of work completed in December.

COVID-19 UPDATE: Kraus-Anderson has implemented specific jobsite protocol to minimize the job site impact of COVID-19. All onsite personnel are required to complete a daily screening questionnaire to ensure potentially infected people are not allowed onsite. Should a questionnaire indicate a potentially infected individual, a response plan is put in place; before the individual is allowed to return to the jobsite, a return-to-work form must be accepted by the superintendent. Some of Kraus-Anderson's best management practices that have been adopted onsite include limiting job trailer access solely to the two Kraus-Anderson superintendents, holding virtual meetings, wearing masks 100% of the time, maintaining at least six feet between each other when possible, installing hand sanitizer stations throughout the site, and disinfecting portable restrooms, door handles, and other high-touch surfaces multiple times a day. Attached are the aforementioned documents put forth by Kraus-Anderson and made available to all onsite personnel.

Work completed in December and in progress:

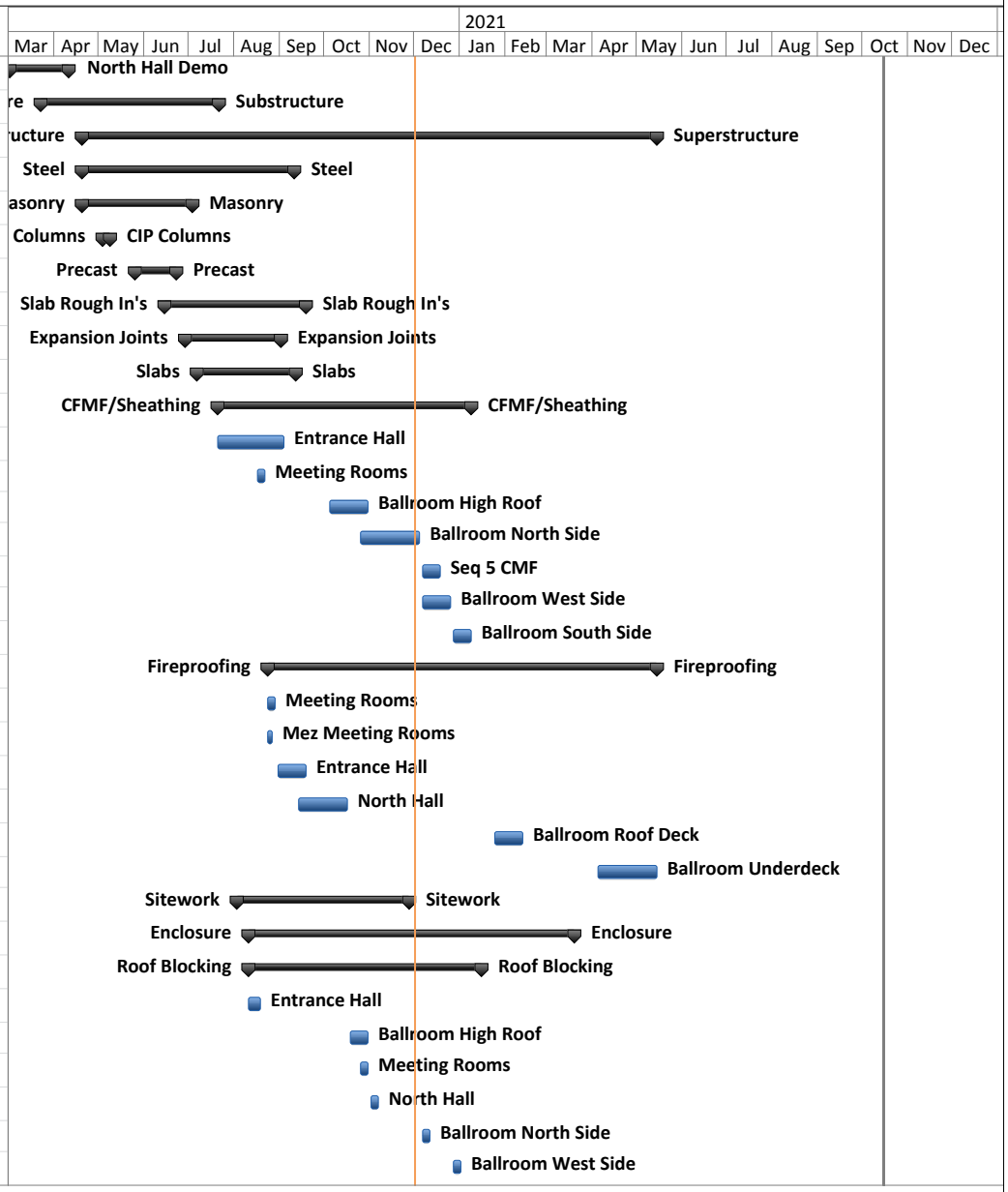
- Installed Ballroom exterior walls
- Installed passenger and freight elevators
- Painted Entrance Hall walls and ceiling
- Installed Entrance Hall suspended ceilings
- Installed Entrance Hall casework and countertops
- Installed meeting level drywall
- Installed arena speakers
- Installing Ballroom roof
- Installing Entrance Hall metal wall panel
- Installing Entrance Hall escalators
- Installing Entrance Hall floor tile
- Installing Entrance Hall doors
- Painting North Hall walls and ceiling
- Installing North Hall suspended ceilings
- Installing North Hall accordion fire doors
- Installing office level casework and countertops
- Installing office level and meeting level MEPs

Upcoming work in January:

- Install Entrance Hall metal wall panel
- Install Ballroom curtain wall
- Polish North Hall concrete floor
- Install North Hall epoxy floor
- Paint office level and meeting level walls
- Install office level suspended ceilings
- Install office level glass

LA CROSSE CENTER
Renovation and Expansion
12/02/20

ID	Task Name	Duration	Start	Finish
1	**North Hall Demo**	**30 days**	**Mon 3/2/20**	**Fri 4/10/20**
24	**Substructure**	**87 days**	**Mon 3/23/20**	**Tue 7/21/20**
46	**Superstructure**	**280 days**	**Mon 4/20/20**	**Fri 5/14/21**
47	**Steel**	**104 days**	**Mon 4/20/20**	**Thu 9/10/20**
86	**Masonry**	**55 days**	**Mon 4/20/20**	**Fri 7/3/20**
81	**CIP Columns**	**5 days**	**Mon 5/4/20**	**Fri 5/8/20**
83	**Precast**	**20 days**	**Tue 5/26/20**	**Mon 6/22/20**
112	**Slab Rough In's**	**70 days**	**Mon 6/15/20**	**Fri 9/18/20**
91	**Expansion Joints**	**47 days**	**Mon 6/29/20**	**Tue 9/1/20**
103	**Slabs**	**49 days**	**Tue 7/7/20**	**Fri 9/11/20**
121	**CFMF/Sheathing**	**124 days**	**Tue 7/21/20**	**Fri 1/8/21**
122	Entrance Hall	33 days	Tue 7/21/20	Thu 9/3/20
123	Meeting Rooms	5 days	Mon 8/17/20	Fri 8/21/20
124	Ballroom High Roof	20 days	Mon 10/5/20	Fri 10/30/20
125	Ballroom North Side	30 days	Mon 10/26/20	Fri 12/4/20
126	Seq 5 CMF	10 days	Mon 12/7/20	Fri 12/18/20
127	Ballroom West Side	15 days	Mon 12/7/20	Fri 12/25/20
128	Ballroom South Side	10 days	Mon 12/28/20	Fri 1/8/21
96	**Fireproofing**	**190 days**	**Mon 8/24/20**	**Fri 5/14/21**
99	Meeting Rooms	5 days	Mon 8/24/20	Fri 8/28/20
100	Mez Meeting Rooms	3 days	Mon 8/24/20	Wed 8/26/20
98	Entrance Hall	15 days	Mon 8/31/20	Fri 9/18/20
97	North Hall	25 days	Mon 9/14/20	Fri 10/16/20
102	Ballroom Roof Deck	15 days	Mon 1/25/21	Fri 2/12/21
101	Ballroom Underdeck	30 days	Mon 4/5/21	Fri 5/14/21
304	**Sitework**	**85 days**	**Mon 8/3/20**	**Fri 11/27/20**
129	**Enclosure**	**159 days**	**Tue 8/11/20**	**Fri 3/19/21**
130	**Roof Blocking**	**114 days**	**Tue 8/11/20**	**Fri 1/15/21**
133	Entrance Hall	6 days	Tue 8/11/20	Tue 8/18/20
134	Ballroom High Roof	10 days	Mon 10/19/20	Fri 10/30/20
131	Meeting Rooms	5 days	Mon 10/26/20	Fri 10/30/20
132	North Hall	5 days	Mon 11/2/20	Fri 11/6/20
135	Ballroom North Side	5 days	Mon 12/7/20	Fri 12/11/20
136	Ballroom West Side	5 days	Mon 12/28/20	Fri 1/1/21



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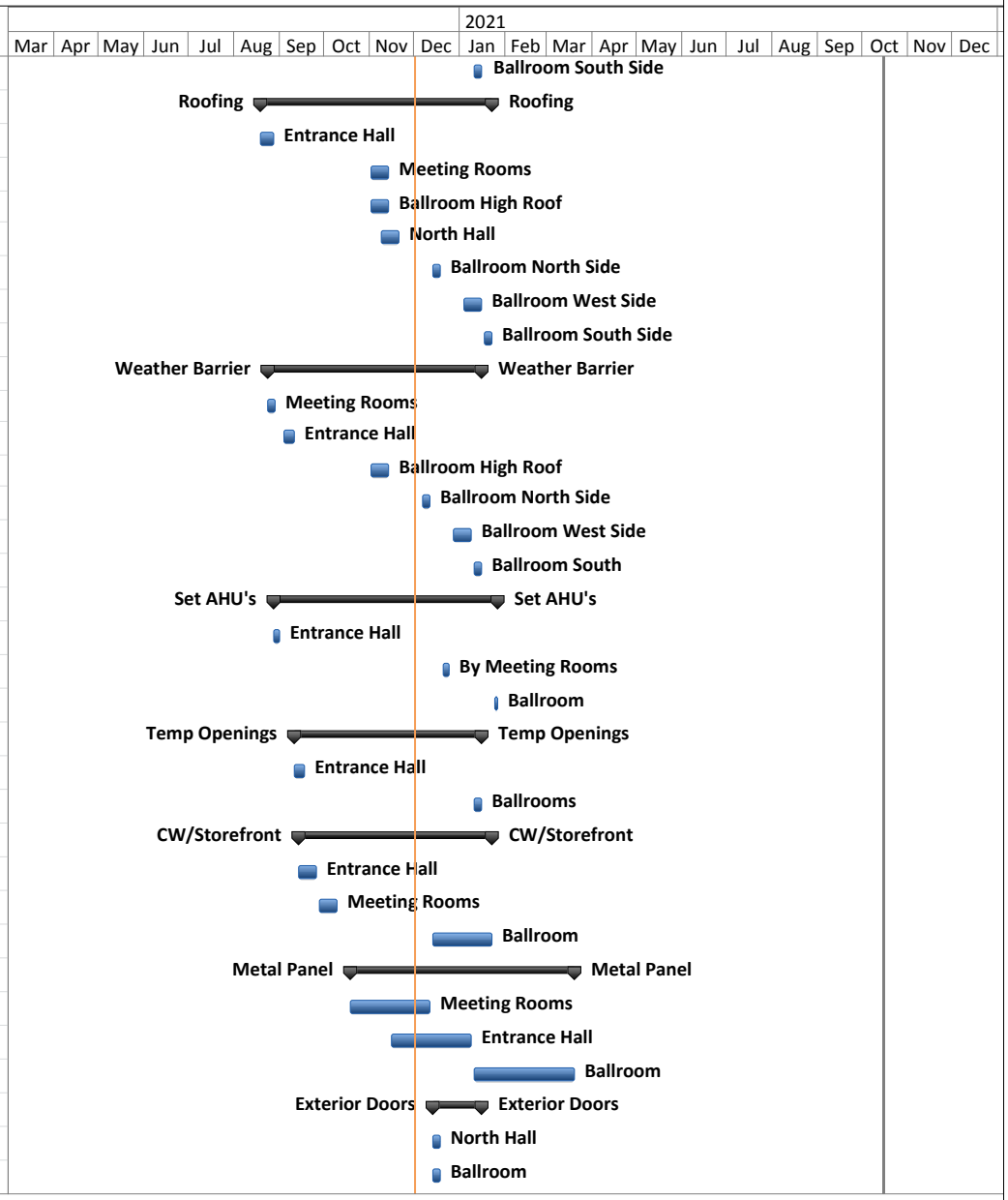
ID	Task Name	Duration	Start	Finish
137	Ballroom South Side	5 days	Mon 1/11/21	Fri 1/15/21
145	**Roofing**	**113 days**	**Wed 8/19/20**	**Fri 1/22/21**
148	Entrance Hall	7 days	Wed 8/19/20	Thu 8/27/20
146	Meeting Rooms	10 days	Mon 11/2/20	Fri 11/13/20
149	Ballroom High Roof	10 days	Mon 11/2/20	Fri 11/13/20
147	North Hall	10 days	Mon 11/9/20	Fri 11/20/20
150	Ballroom North Side	5 days	Mon 12/14/20	Fri 12/18/20
151	Ballroom West Side	10 days	Mon 1/4/21	Fri 1/15/21
152	Ballroom South Side	5 days	Mon 1/18/21	Fri 1/22/21
138	**Weather Barrier**	**105 days**	**Mon 8/24/20**	**Fri 1/15/21**
140	Meeting Rooms	5 days	Mon 8/24/20	Fri 8/28/20
139	Entrance Hall	5 days	Fri 9/4/20	Thu 9/10/20
141	Ballroom High Roof	10 days	Mon 11/2/20	Fri 11/13/20
142	Ballroom North Side	5 days	Mon 12/7/20	Fri 12/11/20
143	Ballroom West Side	10 days	Mon 12/28/20	Fri 1/8/21
144	Ballroom South	5 days	Mon 1/11/21	Fri 1/15/21
169	**Set AHU's**	**108 days**	**Fri 8/28/20**	**Tue 1/26/21**
170	Entrance Hall	2 days	Fri 8/28/20	Mon 8/31/20
171	By Meeting Rooms	4 days	Mon 12/21/20	Thu 12/24/20
172	Ballroom	2 days	Mon 1/25/21	Tue 1/26/21
166	**Temp Openings**	**91 days**	**Fri 9/11/20**	**Fri 1/15/21**
167	Entrance Hall	5 days	Fri 9/11/20	Thu 9/17/20
168	Ballrooms	5 days	Mon 1/11/21	Fri 1/15/21
157	**CW/Storefront**	**95 days**	**Mon 9/14/20**	**Fri 1/22/21**
158	Entrance Hall	10 days	Mon 9/14/20	Fri 9/25/20
159	Meeting Rooms	10 days	Mon 9/28/20	Fri 10/9/20
160	Ballroom	30 days	Mon 12/14/20	Fri 1/22/21
153	**Metal Panel**	**110 days**	**Mon 10/19/20**	**Fri 3/19/21**
155	Meeting Rooms	40 days	Mon 10/19/20	Fri 12/11/20
154	Entrance Hall	40 days	Mon 11/16/20	Fri 1/8/21
156	Ballroom	50 days	Mon 1/11/21	Fri 3/19/21
162	**Exterior Doors**	**25 days**	**Mon 12/14/20**	**Fri 1/15/21**
163	North Hall	5 days	Mon 12/14/20	Fri 12/18/20
165	Ballroom	5 days	Mon 12/14/20	Fri 12/18/20



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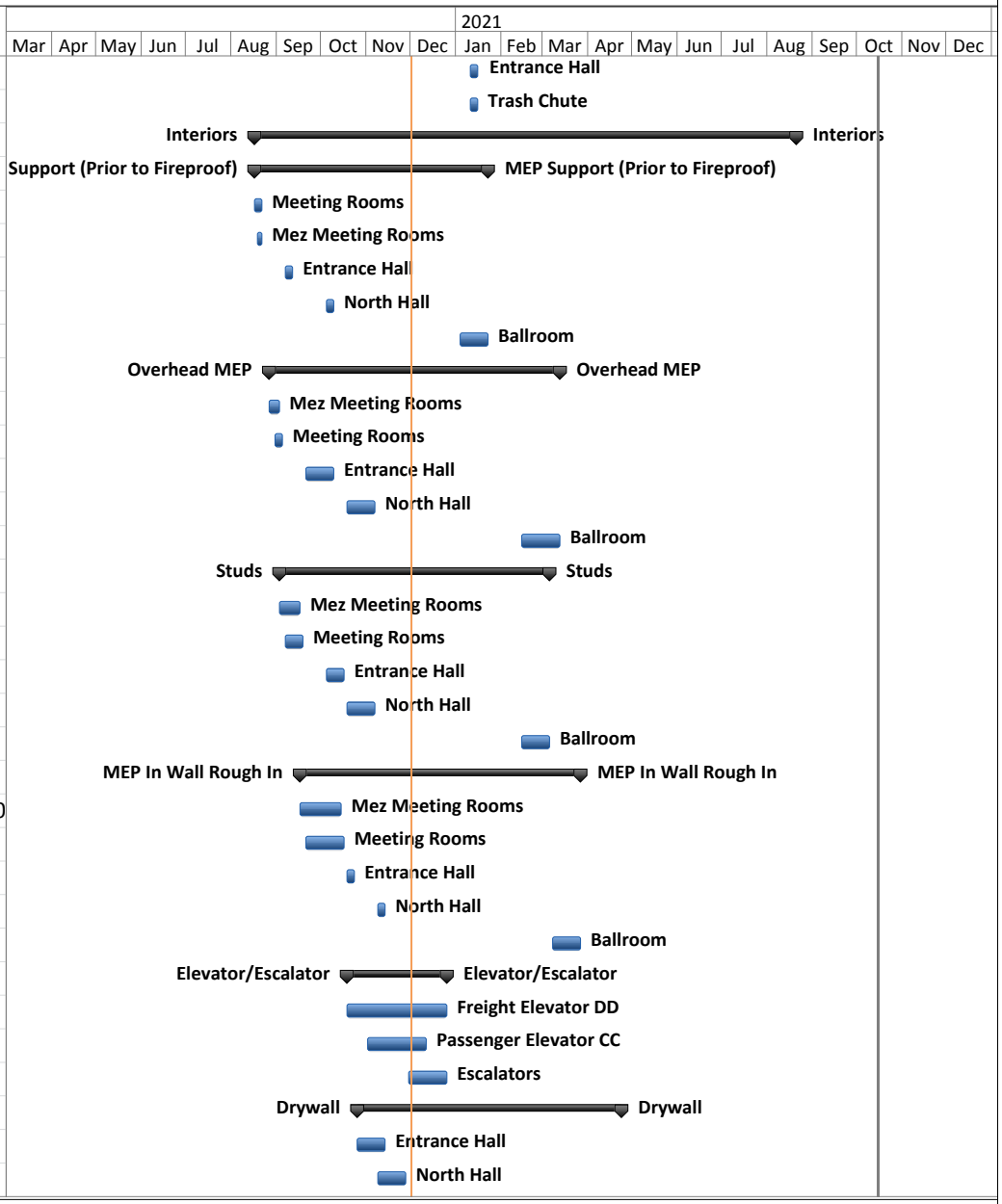
ID	Task Name	Duration	Start	Finish
164	Entrance Hall	5 days	Mon 1/11/21	Fri 1/15/21
161	Trash Chute	5 days	Mon 1/11/21	Fri 1/15/21
173	**Interiors**	**265 days**	**Mon 8/17/20**	**Fri 8/20/21**
174	**MEP Support (Prior to Fireproof)**	**115 days**	**Mon 8/17/20**	**Fri 1/22/21**
177	Meeting Rooms	5 days	Mon 8/17/20	Fri 8/21/20
178	Mez Meeting Rooms	3 days	Wed 8/19/20	Fri 8/21/20
176	Entrance Hall	5 days	Mon 9/7/20	Fri 9/11/20
175	North Hall	5 days	Mon 10/5/20	Fri 10/9/20
179	Ballroom	15 days	Mon 1/4/21	Fri 1/22/21
180	**Overhead MEP**	**142 days**	**Thu 8/27/20**	**Fri 3/12/21**
184	Mez Meeting Rooms	5 days	Thu 8/27/20	Wed 9/2/20
183	Meeting Rooms	5 days	Mon 8/31/20	Fri 9/4/20
182	Entrance Hall	15 days	Mon 9/21/20	Fri 10/9/20
181	North Hall	15 days	Mon 10/19/20	Fri 11/6/20
185	Ballroom	20 days	Mon 2/15/21	Fri 3/12/21
186	**Studs**	**132 days**	**Thu 9/3/20**	**Fri 3/5/21**
190	Mez Meeting Rooms	10 days	Thu 9/3/20	Wed 9/16/20
189	Meeting Rooms	10 days	Mon 9/7/20	Fri 9/18/20
188	Entrance Hall	10 days	Mon 10/5/20	Fri 10/16/20
187	North Hall	15 days	Mon 10/19/20	Fri 11/6/20
191	Ballroom	15 days	Mon 2/15/21	Fri 3/5/21
193	**MEP In Wall Rough In**	**137 days**	**Thu 9/17/20**	**Fri 3/26/21**
197	Mez Meeting Rooms	20 days	Thu 9/17/20	Wed 10/14/20
196	Meeting Rooms	20 days	Mon 9/21/20	Fri 10/16/20
195	Entrance Hall	5 days	Mon 10/19/20	Fri 10/23/20
194	North Hall	5 days	Mon 11/9/20	Fri 11/13/20
198	Ballroom	15 days	Mon 3/8/21	Fri 3/26/21
294	**Elevator/Escalator**	**50 days**	**Mon 10/19/20**	**Fri 12/25/20**
296	Freight Elevator DD	50 days	Mon 10/19/20	Fri 12/25/20
297	Passenger Elevator CC	30 days	Mon 11/2/20	Fri 12/11/20
295	Escalators	20 days	Mon 11/30/20	Fri 12/25/20
199	**Drywall**	**130 days**	**Mon 10/26/20**	**Fri 4/23/21**
201	Entrance Hall	15 days	Mon 10/26/20	Fri 11/13/20
200	North Hall	15 days	Mon 11/9/20	Fri 11/27/20



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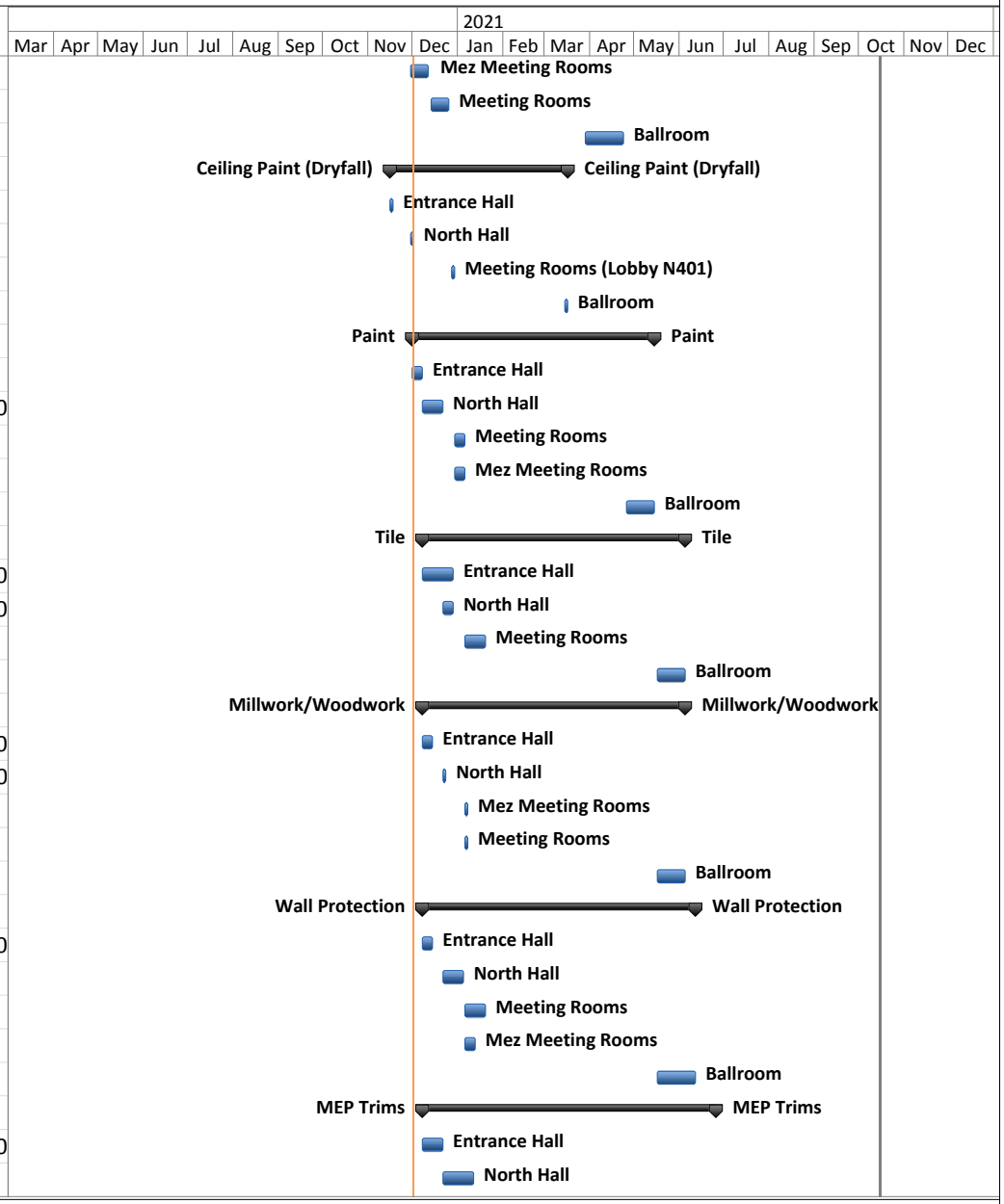
ID	Task Name	Duration	Start	Finish
203	Mez Meeting Rooms	10 days	Mon 11/30/20	Fri 12/11/20
202	Meeting Rooms	10 days	Mon 12/14/20	Fri 12/25/20
204	Ballroom	20 days	Mon 3/29/21	Fri 4/23/21
289	**Ceiling Paint (Dryfall)**	**87 days**	**Mon 11/16/20**	**Tue 3/16/21**
291	Entrance Hall	2 days	Mon 11/16/20	Tue 11/17/20
290	North Hall	2 days	Mon 11/30/20	Tue 12/1/20
292	Meeting Rooms (Lobby N401)	2 days	Mon 12/28/20	Tue 12/29/20
293	Ballroom	2 days	Mon 3/15/21	Tue 3/16/21
205	**Paint**	**119 days**	**Tue 12/1/20**	**Fri 5/14/21**
207	Entrance Hall	5 days	Tue 12/1/20	Mon 12/7/20
206	North Hall	10 days	Tue 12/8/20	Mon 12/21/20
208	Meeting Rooms	5 days	Wed 12/30/20	Tue 1/5/21
209	Mez Meeting Rooms	5 days	Wed 12/30/20	Tue 1/5/21
210	Ballroom	15 days	Mon 4/26/21	Fri 5/14/21
211	**Tile**	**129 days**	**Tue 12/8/20**	**Fri 6/4/21**
213	Entrance Hall	15 days	Tue 12/8/20	Mon 12/28/20
212	North Hall	5 days	Tue 12/22/20	Mon 12/28/20
214	Meeting Rooms	10 days	Wed 1/6/21	Tue 1/19/21
215	Ballroom	15 days	Mon 5/17/21	Fri 6/4/21
216	**Millwork/Woodwork**	**129 days**	**Tue 12/8/20**	**Fri 6/4/21**
218	Entrance Hall	5 days	Tue 12/8/20	Mon 12/14/20
217	North Hall	2 days	Tue 12/22/20	Wed 12/23/20
219	Mez Meeting Rooms	2 days	Wed 1/6/21	Thu 1/7/21
220	Meeting Rooms	2 days	Wed 1/6/21	Thu 1/7/21
221	Ballroom	15 days	Mon 5/17/21	Fri 6/4/21
222	**Wall Protection**	**134 days**	**Tue 12/8/20**	**Fri 6/11/21**
224	Entrance Hall	5 days	Tue 12/8/20	Mon 12/14/20
223	North Hall	10 days	Tue 12/22/20	Mon 1/4/21
225	Meeting Rooms	10 days	Wed 1/6/21	Tue 1/19/21
226	Mez Meeting Rooms	5 days	Wed 1/6/21	Tue 1/12/21
227	Ballroom	20 days	Mon 5/17/21	Fri 6/11/21
233	**MEP Trims**	**144 days**	**Tue 12/8/20**	**Fri 6/25/21**
235	Entrance Hall	10 days	Tue 12/8/20	Mon 12/21/20
234	North Hall	15 days	Tue 12/22/20	Mon 1/11/21



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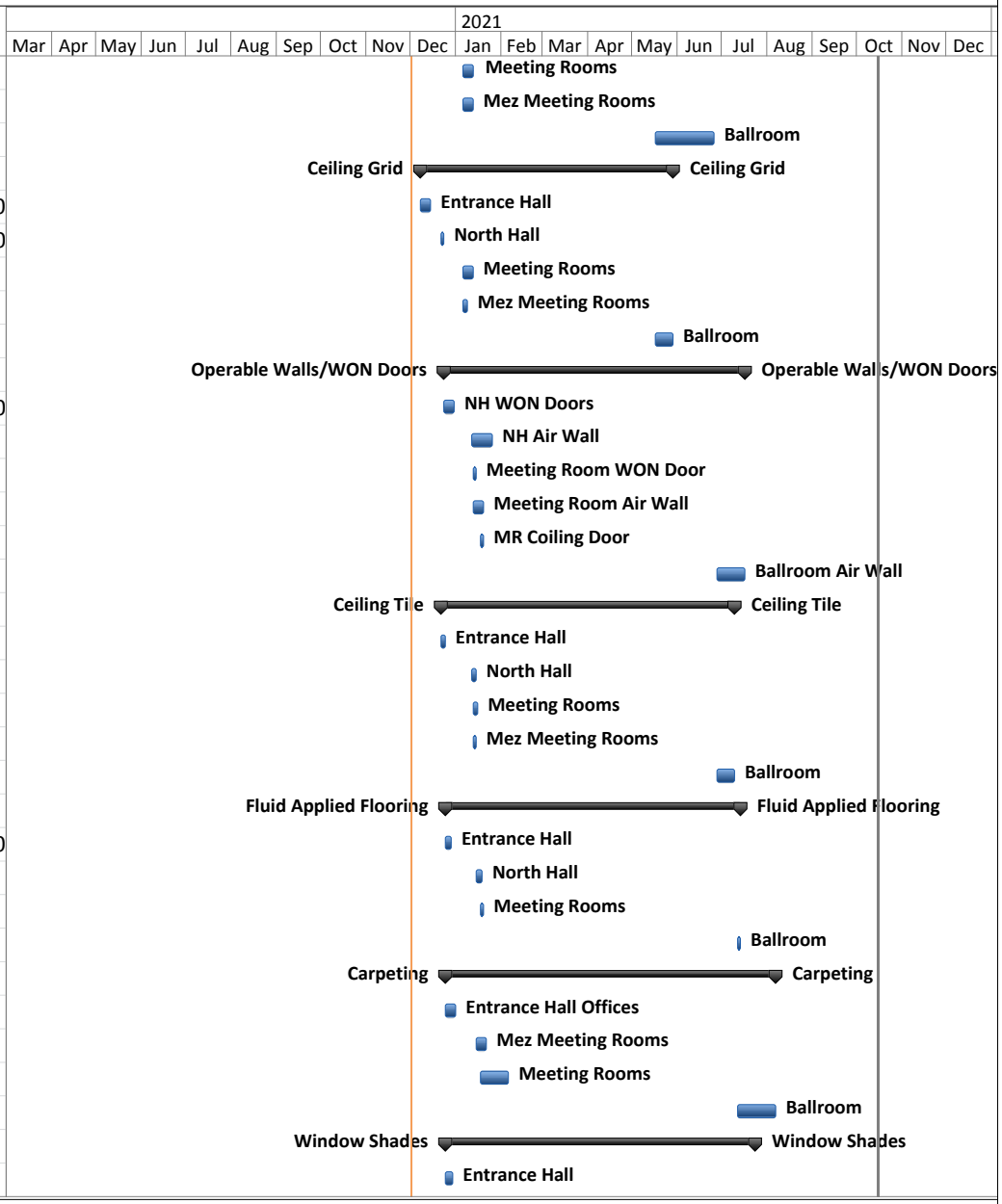
ID	Task Name	Duration	Start	Finish
236	Meeting Rooms	5 days	Wed 1/6/21	Tue 1/12/21
237	Mez Meeting Rooms	5 days	Wed 1/6/21	Tue 1/12/21
238	Ballroom	30 days	Mon 5/17/21	Fri 6/25/21
239	**Ceiling Grid**	**124 days**	**Tue 12/8/20**	**Fri 5/28/21**
241	Entrance Hall	5 days	Tue 12/8/20	Mon 12/14/20
240	North Hall	2 days	Tue 12/22/20	Wed 12/23/20
242	Meeting Rooms	5 days	Wed 1/6/21	Tue 1/12/21
243	Mez Meeting Rooms	3 days	Wed 1/6/21	Fri 1/8/21
244	Ballroom	10 days	Mon 5/17/21	Fri 5/28/21
273	**Operable Walls/WON Doors**	**147 days**	**Thu 12/24/20**	**Fri 7/16/21**
274	NH WON Doors	5 days	Thu 12/24/20	Wed 12/30/20
276	NH Air Wall	10 days	Tue 1/12/21	Mon 1/25/21
275	Meeting Room WON Door	2 days	Wed 1/13/21	Thu 1/14/21
277	Meeting Room Air Wall	5 days	Wed 1/13/21	Tue 1/19/21
278	MR Coiling Door	2 days	Mon 1/18/21	Tue 1/19/21
279	Ballroom Air Wall	15 days	Mon 6/28/21	Fri 7/16/21
245	**Ceiling Tile**	**144 days**	**Tue 12/22/20**	**Fri 7/9/21**
247	Entrance Hall	3 days	Tue 12/22/20	Thu 12/24/20
246	North Hall	3 days	Tue 1/12/21	Thu 1/14/21
248	Meeting Rooms	3 days	Wed 1/13/21	Fri 1/15/21
249	Mez Meeting Rooms	2 days	Wed 1/13/21	Thu 1/14/21
250	Ballroom	10 days	Mon 6/28/21	Fri 7/9/21
257	**Fluid Applied Flooring**	**143 days**	**Fri 12/25/20**	**Tue 7/13/21**
258	Entrance Hall	2 days	Fri 12/25/20	Mon 12/28/20
259	North Hall	2 days	Fri 1/15/21	Mon 1/18/21
260	Meeting Rooms	2 days	Mon 1/18/21	Tue 1/19/21
261	Ballroom	2 days	Mon 7/12/21	Tue 7/13/21
262	**Carpeting**	**161 days**	**Fri 12/25/20**	**Fri 8/6/21**
263	Entrance Hall Offices	5 days	Fri 12/25/20	Thu 12/31/20
265	Mez Meeting Rooms	5 days	Fri 1/15/21	Thu 1/21/21
264	Meeting Rooms	15 days	Mon 1/18/21	Fri 2/5/21
266	Ballroom	20 days	Mon 7/12/21	Fri 8/6/21
285	**Window Shades**	**151 days**	**Fri 12/25/20**	**Fri 7/23/21**
286	Entrance Hall	3 days	Fri 12/25/20	Tue 12/29/20



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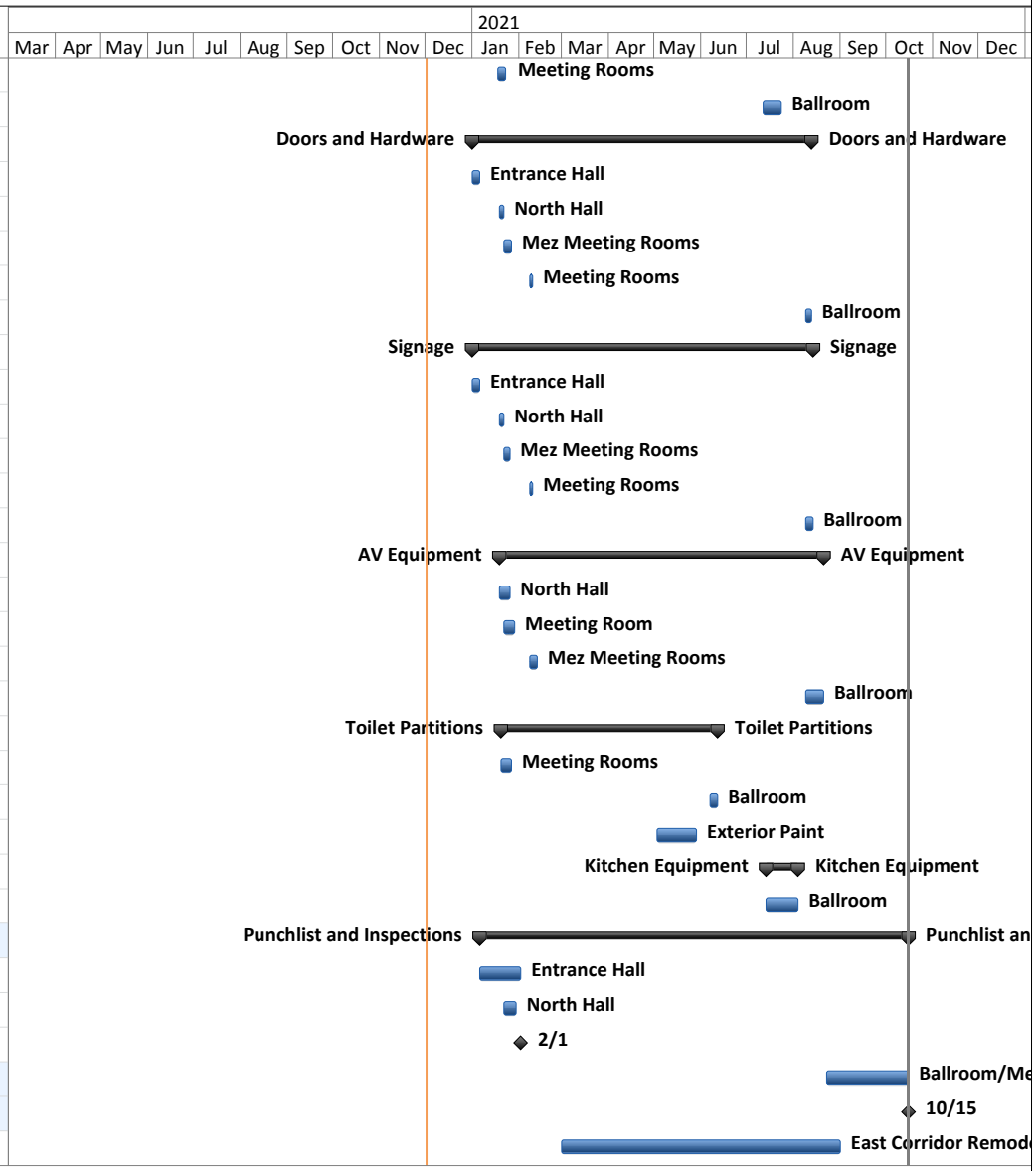
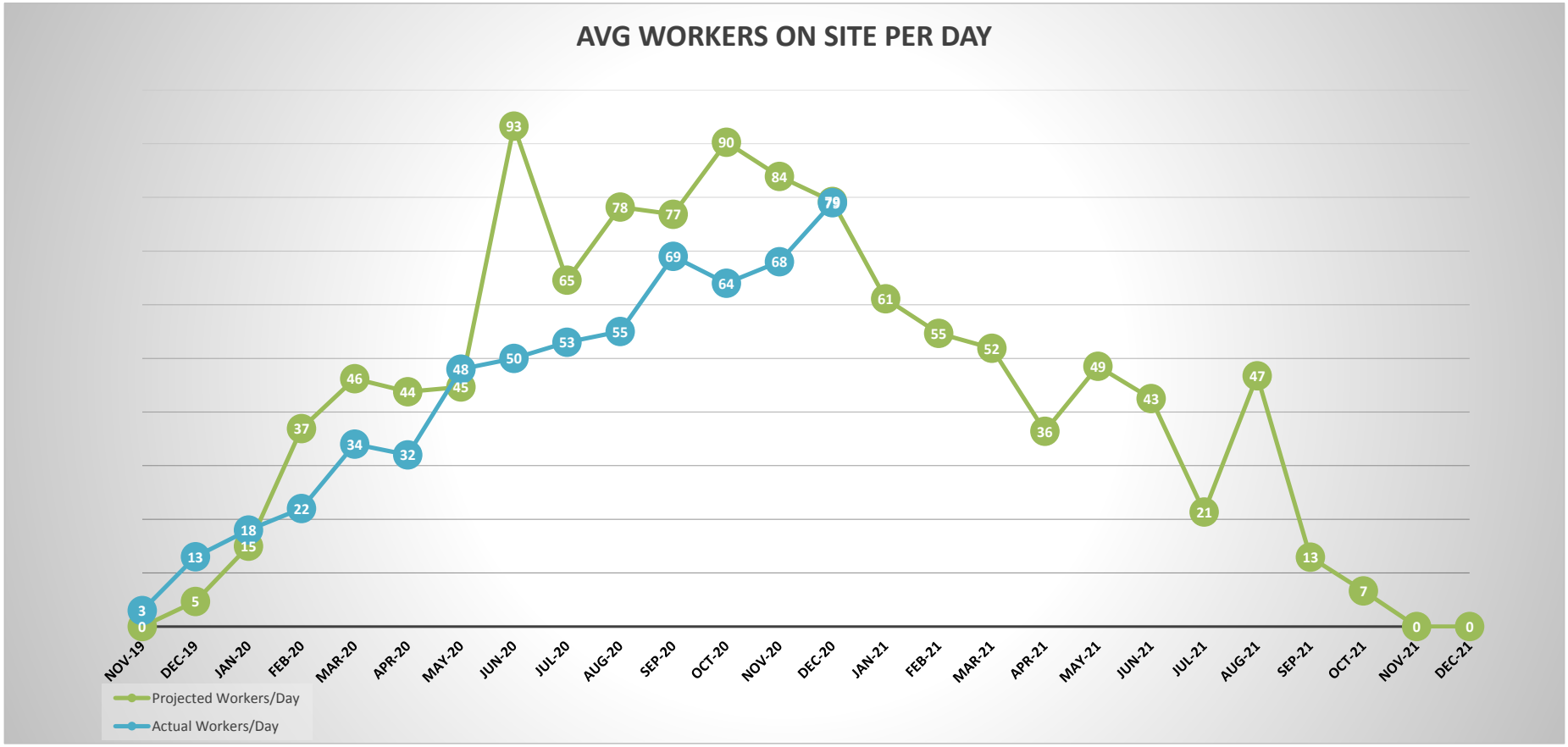
ID	Task Name	Duration	Start	Finish
287	Meeting Rooms	5 days	Mon 1/18/21	Fri 1/22/21
288	Ballroom	10 days	Mon 7/12/21	Fri 7/23/21
251	**Doors and Hardware**	**160 days**	**Fri 1/1/21**	**Thu 8/12/21**
253	Entrance Hall	3 days	Fri 1/1/21	Tue 1/5/21
252	North Hall	3 days	Tue 1/19/21	Thu 1/21/21
254	Mez Meeting Rooms	3 days	Fri 1/22/21	Tue 1/26/21
255	Meeting Rooms	2 days	Mon 2/8/21	Tue 2/9/21
256	Ballroom	4 days	Mon 8/9/21	Thu 8/12/21
267	**Signage**	**161 days**	**Fri 1/1/21**	**Fri 8/13/21**
269	Entrance Hall	3 days	Fri 1/1/21	Tue 1/5/21
268	North Hall	3 days	Tue 1/19/21	Thu 1/21/21
270	Mez Meeting Rooms	2 days	Fri 1/22/21	Mon 1/25/21
271	Meeting Rooms	2 days	Mon 2/8/21	Tue 2/9/21
272	Ballroom	5 days	Mon 8/9/21	Fri 8/13/21
280	**AV Equipment**	**154 days**	**Tue 1/19/21**	**Fri 8/20/21**
281	North Hall	5 days	Tue 1/19/21	Mon 1/25/21
282	Meeting Room	5 days	Fri 1/22/21	Thu 1/28/21
283	Mez Meeting Rooms	5 days	Mon 2/8/21	Fri 2/12/21
284	Ballroom	10 days	Mon 8/9/21	Fri 8/20/21
228	**Toilet Partitions**	**103 days**	**Wed 1/20/21**	**Fri 6/11/21**
229	Meeting Rooms	5 days	Wed 1/20/21	Tue 1/26/21
230	Ballroom	5 days	Mon 6/7/21	Fri 6/11/21
192	Exterior Paint	20 days	Mon 5/3/21	Fri 5/28/21
231	**Kitchen Equipment**	**15 days**	**Wed 7/14/21**	**Tue 8/3/21**
232	Ballroom	15 days	Wed 7/14/21	Tue 8/3/21
298	**Punchlist and Inspections**	**203 days**	**Wed 1/6/21**	**Fri 10/15/21**
299	Entrance Hall	19 days	Wed 1/6/21	Mon 2/1/21
300	North Hall	6 days	Fri 1/22/21	Fri 1/29/21
302	Occupancy Entrance Hall/North Hall	0 days	Mon 2/1/21	Mon 2/1/21
301	Ballroom/Meeting Rooms	40 days	Mon 8/23/21	Fri 10/15/21
303	Occupancy Ballroom/Meeting Rooms	0 days	Fri 10/15/21	Fri 10/15/21
306	East Corridor Remodel	132 days	Mon 3/1/21	Tue 8/31/21




AVG WORKERS ON SITE PER DAY
NOV-19
DEC-19
JAN-20
FEB-20
MAR-20
APR-20
MAY-20
JUN-20
JUL-20
AUG-20
SEP-20
OCT-20
NOV-20
DEC-20
JAN-21
FEB-21
MAR-21
APR-21
MAY-21
JUN-21
JUL-21
AUG-21
SEP-21
OCT-21
NOV-21
DEC-21
0
5
15
37
46
44
45
93
65
78
77
90
84
79
61
55
52
36
49
43
21
47
13
7
0
0
3
13
18
22
34
32
48
50
53
55
69
64
68
79
Projected Workers/Day
Actual Workers/Day

LET'S
DO
THIS.

WERNER
WIESER BROS.

301
302
304
305
EXIT

REFUSE ONLY
WOOD ONLY

WOOD
ONLY

TICKETS & ENTRANCE
FMI

Holiday Inn
WIESER BROTHERS
KISH SONS
KRAUS-ANDERSON
CONSTRUCTION COMPANY

Holiday Inn
JLG LIFT
JLG LIFT
rocfoamers

KRAUS-ANDERSON

COVID-19 SCREENING QUESTIONNAIRE

Project / Location Name: _____

In response to the Coronavirus (COVID-19) pandemic and State and Federal Government guidelines, KA is taking precautions to lessen the spread of the virus. All individuals who enter a KA office or jobsite must be screened until further notice.

Please answer the following screening questions:

1. Within the past 14 days have you (a) returned from, or been exposed to anyone who returned from, any Level 2 or Level 3 travel country designated by the Centers for Disease Control ("CDC") (examples include China, Europe, South Korea, Iran, Iceland, Japan, etc.); or (b) utilized domestic air travel and have not received a negative COVID-19 infection test result from an infection test performed more than 5 days after the completion of your domestic air travel?

   YES_____ NO_____

2. To the best of your knowledge, have you been diagnosed with COVID-19 or have you been exposed* to someone who has been diagnosed with COVID-19 within the ten (10) days prior to the person's diagnosis (*you have been "exposed" to someone diagnosed with COVID-19 if (a) you were a member of their household or providing care to them in their household, (b) you were their intimate partner or (c) you had close contact (less than 6 feet) with the infected person for a prolonged period of time (more than 10 minutes))?

   YES_____ NO_____

3. To the best of your knowledge, have you experienced or been exposed to anyone that is currently experiencing any of the following COVID-19 symptoms: (a) a fever of 100.4ºF or higher, (b) a new cough not attributable to another health condition, (c) a new sore throat not attributable to another health condition, (d) new muscle aches not attributable to another health condition or that may have been caused by a specific activity like physical exercise, (e) new loss of taste or smell or (f) new shortness of breath not attributable to another health condition?

   YES_____ NO_____

If you answered "Yes" to any of the above questions, access to any offices or jobsites will be denied and the KA COVID-19 Response Plan must be followed. If you are coming to the office or jobsite for a meeting we ask that you make other arrangements to participate remotely.

The information provided on this questionnaire will be treated as confidential by KA. It will only be reviewed by KA personnel as needed to manage site safety protocols and will not be shared with anyone outside of KA without consent.

By signing below, I certify all of the foregoing statements are true and correct, and I agree that if any of the above answers change I will notify the KA supervisor or my KA contact immediately.

First Name: _____

Last Name: _____

Company Name: _____

Date: _____

Signature: _____

COVID-19 RESPONSE TO SICKNESS PLAN:

WORKER EXHIBITS COVID-19 SYMPTOMS or "YES" ANSWER ON COVID-19 SCREENING QUESTIONNAIRE

A. In the event that COVID-19 infects or presumptively infects someone on a KA site, or a worker answers "yes" to one of the questions on the KA COVID-19 Screening Questionnaire, the following actions shall be taken:

- Notify KA Superintendent.
- Employer to immediately remove worker and their personal belongings from the jobsite by using industry-standard protocols and CDC guidelines to prevent the spread of COVID-19.
- Notify employer's office.
- Instruct worker to seek medical attention and self-quarantine.
- Notify the following KA personnel with an email including location/worksite, areas on the site where the infected worker was physically present, employer information, dates infected worker was on site over the two (2) work days prior to the earlier of the date the infected worker (i) developed COVID-19 symptoms or (ii) was tested to confirm the infected worker's diagnosis (if any), names (if then known) of other workers who had close contact (less than six feet for prolonged period of more than 10 minutes) with the infected worker, etc.:
    - KA Human Resources:
        - Leslie Greves: leslie.greves@krausanderson.com
        - Back-up if unavailable: Diane Toll: diane.toll@krausanderson.com
    - KA Field Operations:
        - Brian Hook: brian.hook@krausanderson.com
        - Back-up if unavailable: Rick Lund: rick.lund@krausanderson.com
    - KA Safety Department:
        - Jay VanderLeest: jay.vanderleest@krausanderson.com
        - Back-up if unavailable: Jake Leoni: jake.leoni@krausanderson.com

B. In a case of an employee or trade contractor employee that answers "yes" to the first question on the KA COVID-19 Screening Questionnaire:

- If the involved travel was to a Level 2 or Level 3 travel country, notify the worker's employer to direct the worker to self-quarantine for 14 days after the last date of

travel exposure. If at the end of the 14-day self-quarantine the worker has not exhibited COVID-19 symptoms for at least 24 hours, they may return to work. (KA COVID-19 Return to Work Form required)

- If the involved travel was **domestic** air travel, notify the worker's employer to direct the worker to self-quarantine for 10 days after the last date of travel exposure. If at the end of the 10-day self-quarantine the worker has not exhibited COVID-19 symptoms for at least 24 hours, they may return to work. (KA COVID-19 Return to Work Form required)
- If the involved travel was **domestic** air travel, if during the 10-day self-quarantine the worker medically tests negative for COVID-19 as a result of an infection test performed more than 5 days after the completion of **domestic** air travel, the worker may return to work so long as at least 7 days have passed since the last date of travel exposure and the worker has not exhibited COVID-19 symptoms for at least 24 hours. (KA COVID-19 Return to Work Form required)

C. In a case of an employee or trade contractor employee that answers "yes" to the second question on the KA COVID-19 Screening Questionnaire or tests positive for COVID-19:

- Notify the worker's employer to direct the worker to contact their medical provider and self-quarantine for 10 days after being diagnosed with COVID-19 or their last exposure to an individual diagnosed with COVID-19. If (i) the worker's exposure was to an individual diagnosed with COVID-19 that lives in the worker's home or (ii) the worker is working in any occupied multi-tenant or multi-patient residential, healthcare or long term care facility, or any similar facility, the worker must self-quarantine for 14 days after being diagnosed with COVID-19 or their last exposure to an individual diagnosed with COVID-19, without exception. If at the end of the applicable self-quarantine period the worker has not exhibited COVID-19 symptoms for at least 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants), they may return to work. (KA COVID-19 Return to Work Form required)
- In the case of an exposed worker who is self-quarantining for 10 days, if during the 10-day self-quarantine the worker medically tests negative for COVID-19 as a result of an infection test performed more than 5 days after their last exposure to the individual diagnosed with COVID-19, the worker may return to work after completing only 7 days of quarantining so long as the worker has not exhibited COVID-19 symptoms for at least 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants). (KA COVID-19 Return to Work Form required)
- Follow KA Crisis Communication Plan
- Call the Department of Health for which state you are in to relay the location and circumstances.
- Follow any recommendations by the Department of Health.
- Depending on the type of exposure, the Construction jobsite may be temporarily shut down to allow KA's Safety Department to evaluate the infection exposure and any recommendations from the Department of Health with the KA jobsite team. Once the evaluation is complete, the KA Safety Department will determine the potential need for jobsite isolation or shutdown.

- Employer of infected worker to follow applicable guidelines from the State Department of Health or other agency with jurisdiction, with assistance from KA if necessary. Do not allow any person in that area until the disinfection has been completed according to CDC guidelines.
- Employer of infected worker to disinfect work area, tools and equipment that have been exposed by the infected worker according to CDC guidelines, with assistance from KA if necessary. In some cases, a third-party company will be hired to clean and disinfect all the areas the infected employee may have used, focusing on frequently touched surfaces.
- With the assistance of the KA Safety Department and the employer of the infected worker who tested positive for COVID-19, the KA jobsite team will determine if other workers were in close contact (less than six feet for prolonged period of more than 10 minutes) with the infected worker within 48 hours prior to the earlier of the date the infected worker (i) developed COVID-19 symptoms or (ii) was tested to confirm the infected worker's diagnosis:

    - If other workers are determined to have been in close contact with the infected worker, remove those workers from the jobsite and notify employers of exposed workers to direct those worker(s) to contact their medical provider and self-quarantine for 10 days after their last exposure to the infected worker. If, however, the exposed worker is working in any occupied multi-tenant or multi-patient residential, healthcare or long term care facility, or any similar facility, the worker must self-quarantine for 14 days without exception. If at the end of the 10-day self-quarantine period those workers have not exhibited COVID-19 symptoms for at least 24 hours, they may return to work. (KA COVID-19 Return to Work Form required)
    - In the case of exposed workers who are self-quarantining for 10 days, if during the 10-day self-quarantine any of those workers medically test negative for COVID-19 as a result of an infection test performed more than 5 days after their last exposure to the infected individual, they may return to work after completing only 7 days of quarantining so long as the worker has not exhibited COVID-19 symptoms for at least 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants). (KA COVID-19 Return to Work Form required)

D. In a case of an employee or trade contractor employee that answers "yes" to the third question on the KA COVID-19 Screening Questionnaire:

- Notify the worker's employer that the worker must remain home until the worker (i) medically tests negative for COVID-19 as a result of an infection test performed more than 5 days after their symptom(s) first appeared and (ii) is symptom free for 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants). (KA COVID-19 Return to Work Form required)
- The sick worker and any workers that were in close contact with the sick worker shall remain off site until the sick worker receives the results of a COVID-19

infection test performed more than 5 days after the sick worker's symptom(s) first appeared, and as follows:

- Positive Test: If the COVID-19 test is positive, the protocols under Section III.C above apply.
  - Notify the infected worker's employer to direct the worker to contact their medical provider and self-quarantine for 10 days. If at the end of the applicable self-quarantine period the worker has not exhibited COVID-19 symptoms for at least 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants), they may return to work. (KA COVID-19 Return to Work Form required)
  - Notify the employers of any workers exposed to the infected worker to direct those worker(s) to contact their medical provider and self-quarantine for 10 days after their last exposure to the infected individual. If, however, the exposed worker is working in any occupied multi-tenant or multi-patient residential, healthcare or long term care facility, or any similar facility, the worker must self-quarantine for 14 days without exception. If at the end of the applicable self-quarantine period those workers have not exhibited COVID-19 symptoms for at least 24 hours, they may return to work. (KA COVID-19 Return to Work Form required)
  - In the case of exposed workers who are self-quarantining for 10 days, if during the 10-day self-quarantine any of the exposed workers medically test negative for COVID-19 as a result of an infection test performed more than 5 days after their last exposure to the infected individual, they may return to work after completing only 7 days of quarantining so long as the worker has not exhibited COVID-19 symptoms for at least 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants). (KA COVID-19 Return to Work Form required)
- Negative Test: If the COVID-19 test is negative, the sick worker and any workers exposed to the sick worker may return to work as long as those workers have not exhibited COVID-19 symptoms for at least 24 hours without the use of fever-reducing or other symptom-altering medicines (e.g., cough suppressants). (KA COVID-19 Return to Work Form required)

E. In the event of a temporary project suspension in accordance with this Plan, or as directed by the State Department of Health, other authorities having jurisdiction, and/or the owner, follow KA's procedures for a temporary jobsite shutdown and provide the necessary notifications to all stakeholders.

F. Project Team shall coordinate with building owner/facility manager with respect to all COVID-19 safety precautions.

G. Requirements for Returning to Work

- A worker infected with COVID-19 may return to the site provided they can satisfy all of the CDC recommended guidelines outlined below.
    - Worker is no longer exhibiting COVID-19 virus symptoms **AND**
        - If under a physician's care, submits a physician signed medical release form and a KA COVID-19 Return to Work form to KA Superintendent **OR**
        - If not under a physicians' care, submits a KA COVID-19 Return to Work form to KA Superintendent.

- COVID-19 Return to Work form is an employee statement attesting to the following CDC guidelines:
    - Employee has no fever (100.4 F or higher) for at least 24 hours without the use of fever reducing medications **AND**
    - Other symptoms have improved (for example, cough or shortness of breath have improved) **AND**
    - At least 7 days have passed since symptoms first appeared.

- For non-infected workers excluded from the jobsite, see Section D above for return to work guidelines.

KRAUS-ANDERSON®

COVID-19 RETURN TO WORK FORM

NAME: _____

KA EMPLOYEE: YES ☐ **NO** ☐ **TRADE CONTRACTOR: YES** ☐ **NO** ☐
JOBSITE OR OFFICE LOCATION: _____
SUPERVISOR: _____

1. **Were you on self-quarantine from a KA jobsite or office?**
   YES ☐ **or NO** ☐ **N/A** ☐

2. **Have you completed your self-quarantine for the full 10 days after your last exposure to an individual diagnosed with COVID-19?**
   YES ☐ **or NO** ☐ **N/A** ☐

3. **Have you been free from any COVID-19 symptoms for at least 24 hours (for example, fever (100.4 F or higher), cough or shortness of breath)?**
   YES ☐ **or NO** ☐ **N/A** ☐

4. **Have you received a medically-approved COVID-19 test performed more than 5 days after your last exposure to an individual diagnosed with COVID-19 that came back negative?**
   YES ☐ **or NO** ☐ **N/A** ☐

5. **If you answered "Yes" to question 4, have you completed 7 days of quarantining after your last exposure to an individual diagnosed with COVID-19?**
   YES ☐ **or NO** ☐ **N/A** ☐

6. **Did you go to the doctor?** **YES** ☐ **or NO** ☐ **N/A** ☐

7. **Were you diagnosed with COVID-19?** **YES** ☐ **or NO** ☐ **N/A** ☐

8. **If you answered "Yes" to question 7, have you completed your self-quarantine for the full 10 days after you were diagnosed with COVID-19?**
   YES ☐ **or NO** ☐ **N/A** ☐

9. **If you answered "Yes" to questions 7 and 8, have you been fever free (less than 100.4 F) for 24 hours without using fever reducing medications?**
   YES ☐ **or NO** ☐ **N/A** ☐

10. **If you answered "Yes" to questions 7 and 8, have your other Covid-19 symptoms improved?**
    Cough **YES** ☐ **or NO** ☐ **N/A** ☐
    Shortness of Breath **YES** ☐ **or NO** ☐ **N/A** ☐
    Other Symptoms **YES** ☐ **or NO** ☐ **N/A** ☐

11. **If you answered "No" to question 7, have you (a) received a medically-approved COVID-19 test performed more than 5 days after your symptoms first appeared that came back negative <u>and</u> (b) been free from any COVID-19 symptoms for at least 24 hours without using fever reducing or other symptom-altering medications?**
    YES ☐ **or NO** ☐ **N/A** ☐

12. **If you answered "Yes" to question 6, please attach a medical release form from your treating physician stating you are cleared to return to work.**

Employee signature: _____**Date:** _____

Return to work accepted: **YES** ☐ **or NO** ☐

HR Representative or Superintendent: _____**Date:**_____

KRAUS-ANDERSON®

COVID-19 RETURN TO WORK FORM - TRAVEL

NAME: _____

KA EMPLOYEE: YES ☐ **NO** ☐ **TRADE CONTRACTOR: YES** ☐ **NO** ☐

JOBSITE OR OFFICE LOCATION: _____

SUPERVISOR: _____

1. **Were you on self-quarantine from a KA jobsite or office related to travel?**

   YES ☐ **or NO** ☐ **N/A** ☐

2. **If the involved travel was to a Level 2 or Level 3 travel country, have you completed your self-quarantine for the full 14 days after your last date of travel exposure ?**

   YES ☐ **or NO** ☐ **N/A** ☐

3. **If you answered "Yes" to question 2, have you been free from any COVID-19 symptoms for at least 24 hours (for example, fever (100.4 F or higher), cough or shortness of breath)?**

   YES ☐ **or NO** ☐ **N/A** ☐

4. **If the involved travel was <u>domestic</u> air travel, have you completed your self-quarantine for the full 10 days after your last date of travel exposure?**

   YES ☐ **or NO** ☐ **N/A** ☐

5. **If you answered "No" to question 4 and the involved travel was <u>domestic</u> air travel, have you received a medically-approved COVID-19 test performed more than 5 days after the completion of <u>domestic</u> air travel that came back negative?**

   YES ☐ **or NO** ☐ **N/A** ☐

6. **If you answered "Yes" to question 5, have you completed 7 days of quarantining after your last date of travel exposure?**

   YES ☐ **or NO** ☐ **N/A** ☐

7. **If you answered "Yes" to question 6, have you been free from any COVID-19 symptoms for at least 24 hours (for example, fever (100.4 F or higher), cough or shortness of breath)?**

   YES ☐ **or NO** ☐ **N/A** ☐

Employee signature: _____**Date:** _____

Return to work accepted: YES ☐ **or NO** ☐

HR Representative or Superintendent: _____**Date:**_____