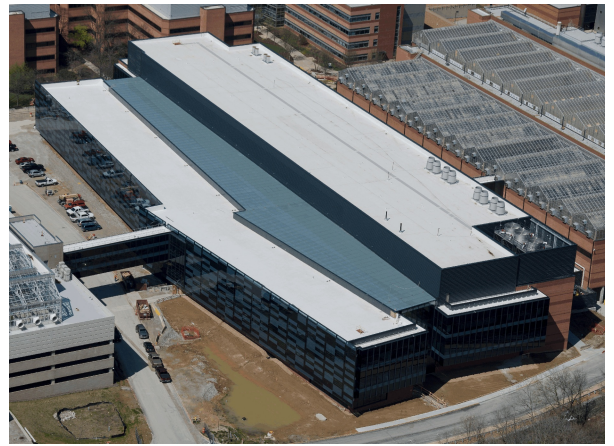




# Monsanto tour

## Lessons Learned: Building a Technology Center



- ◆ How did BIM support design and construction?
- ◆ What was incorporated to seek LEED certification?
- ◆ What were the diversity and inclusion expectations? How were they met?
- ◆ Why was an OCIP used? What impact did it have on safety?

Presenters:  
**Rick Haar**, Monsanto  
**Bob Salek**, Monsanto  
**Edwin Crader**, Monsanto

**John Corson**, Jacobs  
**Anselmo Testa**, Jacobs  
**Frank Lahm**, Alberici  
**Derek Knauss**, Alberici

### PDH & LU credit

This program has been designed to permit you to qualify for 1.5 Professional Development Hours (PDH) for Professional Engineers under Missouri statutes and 1.5 Learning Units (LU) through the American Institute of Architects.

### Monsanto

700 Chesterfield Parkway West  
 Chesterfield, MO 63017

**Wednesday, May 24, 2017** — Two options to choose from (limited to 40 people / session):

7:00 am	Registration & networking	3:30 pm	Registration & networking
7:30 am	Breakfast / Presentation	4:00 pm	Reception / Presentation
8:00 am	Tour	4:30 pm	Tour
9:00 am	Adjournment <b>FULL</b>	5:30 pm	Adjournment



### Registration - for security purposes, register by May 16, 2017 – [http://www.slccc.net/calendar\\_list.asp](http://www.slccc.net/calendar_list.asp)

Please make reservations so that we can provide sufficient meals, materials & tour arrangements. Uncanceled reservations will be invoiced.

AM	PM	Either	Name	Organization	E-mail	SLCCC member \$40.*	non member \$70
<input type="checkbox"/>			_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>			_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>			_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>			_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

\* Construction Consumer (buyers of construction services) / Owner member discount:

- Sustaining members - 3 complimentary registrations
- Corporate members - 2 complimentary registrations
- Public members - 1 complimentary registration

Charge to my Credit card:  American Express  Discover  MasterCard  Visa \$ \_\_\_\_\_  
 Acct No. \_\_\_\_\_ Expiration Date \_\_\_\_\_ CVV/CVC Code \_\_\_\_\_  
 Name on card (print) \_\_\_\_\_ Signature \_\_\_\_\_ Billing zip code \_\_\_\_\_

Does any registrant have a disability or special dietary need which needs accommodation?  Yes  No  
 If yes, what type of accommodation is needed? \_\_\_\_\_

Reservations made by: Name \_\_\_\_\_ Organization \_\_\_\_\_ Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Please return to:  
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