## sedgwick, Ste. 500

(312) 744-9660

go, IL 60654-8488

## CITY OF CHICAGO ALDERMAN 39th **2018 STATEMENT OF FINANCIAL INTERESTS**

To avoid a violation of the Governmental Ethics Ordinance and sanctions, including fines and having your name and violation being made public, you must return this form, completed and signed, no later than the close of business Thursday, May 31, 2018 to:

60654-8488

Board of Ethics 740 N. Sedgwick, Ste. 500 Chicago, IL ecomplete this form, sign it and then mail / deliver it to the Board of Ethics . We cannot accept Statements via e-mail, (a) or ermats. Please answer all 16 questions and sign and date your form before returning it. If you need more room, please attach and label extra sheets. Terms with an asterisk(\*) are defined on the instruction sheet. + In questions 2-5 & 8, indicate the appropriate income, compensation or capital gain by writing in the appropriate category letter: C= less than \$5,000 A= \$25,000 or more B= \$5,000 - \$24,999

NOTE: for security reasons, filers in the Chicago Fire and Police Departments, Inspector General's Office, Civilian Office of Police Account and Office of Emergency Communications and building and health inspectors need not disclose the address of business(es), of Ganization property in questions 2 or 9: for question 9, however, they must list the number and types of properties owned, for example:

ast wan	ne: Duplechin		First I	Name:	Joseph	1		Mid	dle Initial:	Р				
lailing a	Address:						Ci	ty: Chica	igo	State:	II.	Zip:	60 <del>6</del>	
	partment/Board nission: canc	didate					Title	candid	ate					
In 201	7, were you employe	ed by any gove	rnmental	unit oth	er thar	the City o	of Chicago?					□ Y	/es	⊠ No
	list the name of governmental unit													
ofessio rived i	7, did you serve as a onal, business or othe ncome of more than	r organization \$1,000.00?	(other th	an your	City e	mployme	nt or appointn	nent) from	n which yo			□ Y	es	⊠ Na
If YE	S, for each organizati	ion provide the	e following	g inform	nation:	(see note a	above)				7			_
ame & ddress:	:			Type of Organiza				Your Position				nount o		ne,
siness	7, did you receive con * with the City of Chic litan Pier and Exposit	cago, the Chica	go Transi	it Author	rity, Ch	icago Boar	d of Education,	Chicago						oing
If YE	S, provide the follow	ing for each pe	erson or er	ntity to v	which y	ou provid	ed services:					Yes		X  No
In 201 ork or c	7, did your spouse o	ed to a person'	or entity	eceive co	usines	s* with the	City of Chicago	ss of \$5,0	00.00 for pr		By Ca		emp	oyment
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compani	es that represent le	ess than $1/2$ of $1\%$ (.05%) of the	he compai	ny's outstanding co	mmon stock	, or time or de	mand deposi	its in fin			
institutio	ns, or endowment	s, policies or annuities purcha	ased from	insurance compani	es, need not	be disclosed.)		🗆 ,	Yes	$\times$	No
If YE	S, provide the follo	owing for each person:									
Name					Type / Inst Ownership	trument of					
		capital gain of \$5,000.00 or r						-			
		) sold (including the address						_	Yes	of ga	
		d asset (see note at top of for		escription of the rea	restate, and	з ите арргорна	te category (	n the bi	noone	or ga	
							+ Amount Category	of gain ,	Ву		
forms of	direct or indirect or	financial interest* in real esta wnership, such as partnershi nit or mixed-use building in w	os or trust	s whose corpus con	sists primari	ily of real estate	. (If your prin	ncipal pl	lace of		
	S, identify the real I description:	estate by address (see note a	t top of fo	rm for filers from ce	rtain depart	tments), includi	ing zip code,	or, if the	ere is n	o ado	dress, b
							S				
aggregat	e value in excess o	from any person* (other than f \$250.00?			•	9	ving an	☐ Yes	5	$\boxtimes$	No
If YE	S, identify the pers	on or persons from whom yo	ou received	d such gifts:							
11 1- 20	17 did			- 6:	L C - 4' 2	150 144 -64-					
		any improper gift* that you ance?						Yes	s	X	No
If YE	S, identify the imp	roper gift(s), the donor(s) if kr	nown, and	d method of disposa	ol:						
		a financial interest* in any pe or annexation, zoning or rezo						e 🔲 '	Yes	Σ	∑ No
		e person(s) in which you have action requested):	the finan	cial interest and de	scribe the Ci	ity action reque	ested (includi	ng the r	nature	of the	e
Name						Action Requested					
for the Ci loans of t loans are	ty of Chicago in 20 he kind you receive made at the preva	anyone owes you more than 17? (Do not include: (1) deb ed in accordance with other t illing rate of interest; or (2) do to the public.)	t instrume terms and	ents issued by finan- conditions standar ments issued by pul	cial institution of for such loo olicly held co	ons whose nor pans at the time orporations and	mal business the debt wa d purchased l	include s contra oy you o	s the r icted, i on the	nakin if the open	g of
	S, provide the follo		[	I neither owe or	am owed m	ore than \$5,00	0.00	Ye:	s	×	No
Name	of Debtor,			Is the Person a De	btor		Type of Del	ot [			
	or or Guarantor			Creditor or Guara	201		Instrument	Ľ			
14. Do you	now serve on <b>any</b> b	oard or commission either as a v	olunteer o	r for compensation (in	clude non-Cit	ty boards or com	missions)?	☐ Ye	es.	$\times$	No
If YE	S, provide the Nam	ne(s) of board(s) and your pos	sition(s) or	the board(s):							
		a relative* or domestic partne		-	yist with th	e City's Board o	f Ethics?	☐ Ye	s	×	No
If YE Nam		st(s) and the lobbyist's relation	onship to y	/ou:		Relationship	<u> </u>				
	L	1.5.8.1				•					
If YES,	name the relative(s	relative* or domestic partne s) or domestic partner(s), his/			-20			position			No
	ne(s)/		Contrac	tor(s)		Pos	ition(s)				$\neg$
rela	tionship(s)										
and b	pelief it is true and co t in fines, removal fro	that I have examined this Staten mplete. I understand that know om office, or employment sanction	ingly filing	a Statement containing discharge, in accor	ng false or mis dance with ap	sleading informa oplicable rules, re	tion, or failing egulations and	to file by	the de	adline	, can
-	Joseph	yr wyv	Sigr	nature and Date	-/>	-20,	8				