Boardof Ethics

740 N. Sedgwick, Ste. 500 Chicago, IL 60654-8488 (312) 744-9660

If YES, provide the following for each person:

Name

CITY OF CHICAGO 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 your mast setum this form. 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:

Board of Ethics 740 N. Sedgwick, Ste. 500 Chicago, IL Please complete this form, sign it and then mail / deliver it to the Board of Ethics. We cannot accept Statements via e-mail, fax or PDF formats. 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: A= \$25,000 or more B= \$5,000 - \$24,999 C= less than \$5,000

NOTE: for security reasons, filers in the Chicago Fire and Police Departments, Inspector General's Office, Civilian Office of Police Accountability and Office of Emergency Communications and building and health inspectors need not disclose the address of business (es), organizations or property in questions 2 or 9; for question 9, however, they must list the number and types of properties owned, for example: two 6-flats, etc.

st Name: Solo 1					
_CMWF	ARTZEPS Firs	t Name: Thou	MAS	Middle Initial:	M
iling Address:			c	ityChicago	State: TL Zip: GOC
Department/Board	11000	Fire De	600 FARMLING	= FF/	EmT
2017, were you employed	-				Yes No
YES, list the name of ach governmental unit					
2017, did you serve as an essional, business or other yed income of more than \$ If YES, for each organization	organization (other t	han your City emplo	yment or appoint	nent) from which ye	ou received or
ne & ress:		Type of Organization:		Your Position	+ Amount of Income, By Category
f YES, provide the following	ng for each person or Nature Servic	e of	Government U	Init With Which by Did Business	+ Amount of Income, By Category
or other services rendered ation, Chicago Park Distric	d to a person* or entit t, Chicago City Colleg	y doing business* witi es, or Metropolitan Pi [h the City of Chicago er and Exposition Au I had no spouse o	o, the Chicago Trans uthority? or domestic partner	in 2017. Yes No
100	Nature Service		Government U Person or Entity		+ Amount of Income, By Category
ne 2017, did any entity in wh	Service hich you OR your spe ther services rendered licago Park District, Ch	ouse or domestic par if to any person* or en inicago City Colleges, o	Person or Entity "tner" have a financi tity doing business" or Metropolitan Pier	y Did Business ial interest* receive with the City of Chi and Exposition Aut	+ Amount of income, By Category compensation in excess of \$5,000.00 icago, the Chicago Transit Authority, thority?
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Title or Description of Position

You Held in This Person

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II YE	5, provide the foll	owing for each person:							1
ame					Type / In Ownersh	nstrument of			
In 2017	7, did you realize	a capital gain of \$5,000.00	or more from t	he sale of any cap	ital asset o	ther than your p	orincipal pla	ace of	Ďď No
If YES, i	identify the asset(s) sold (including the addred asset (see note at top o	ress or legal de					ry of the amou	int of gain
			ř.				+ Amou Catego	unt of gain , By ry	
rms of o	direct or indirect o	a financial interest* in real- ownership, such as partner nit or mixed-use building i	rships or trusts	whose corpus cor	nsists prima	arily of real estat	e. (If your p	orincipal place	nclude all
If YES	S, identify the real description:	estate by address (see no	ite at top of for	m for filers from co	ertain depa	artments), includ	ling zip cod	ie, or, if there i	s no addres
ggregate	e value in excess o	e from any person* (other in the second seco			rtner*) one	or more gifts h	aving an	Yes	No
overnme	ental Ethics Ordin	e any improper gift* that yo ance?				2-156-144 of the	2	Yes	No.
If YES	5, identify the imp	roper gift(s), the donor(s) i	if known, and	method of dispos	a!:				
	se, or any permit	a financial interest* in any for annexation, zoning or r	rezoning of rea	l estate?				Yes	×Ν
If YES, Ii	se, or any permit is the name of the	a financial interest* in any for annexation, zoning or r e person(s) in which you h e action requested):	rezoning of rea	l estate?				Yes	_
Name If you The Cites of the	ist the name of the tion sought or the course of the tion sought or the course of the	for annexation, zoning or represented in which you he action requested): ar anyone owes you more the properties of the	rezoning of rea have the financi than \$5,000.00, debt instrumen	did the debtor, cr ts issued by finan	scribe the (Action Requested uarantor of the tions whose nor loans at the time	debt do bus	Yes ding the natu siness* with o ss includes the vas contracter	re of the
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07-15-2018 Signature and Date