

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

CITY OF CHICAGO 2022 STATEMENT OF FINANCIAL INTERESTS

To avoid a violation of the Governmental Ethics Ordinance and sanctions, including a \$250 fp. of day fine until you file and having your name and violation being made public, you must return this form no later than the close of business Monday, May 2, 2022 to: Board of Ethics, 740 N. 6 addwick. Spire 2022 Chicago, IL 60654-8488

Please complete this form, sign it and then mail / deliver it to the Board of Ethics. We cannot accept Statements via e-mail or fax. 🏳 🤅 all 16 questions and sign 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, OPSA, Inspector General's Office, Civilian Office Police Accountability, Office of Emergency Communications, or who are building, consumer protection or health inspectors need not disclose the address of business(es), organization(s) or property in questions 2 or 9; for question 9, however, they must list the number and types of properties owned, e.g.: "1 single-family house, 2 6-flats. Last Name: Middle Initial: First Name: Address City Department/Agency: 1. In 2021, were you employed by any governmental unit other than the City of Chicago? If YES, list the name of each governmental unit: 2. In 2021, did you serve as an employee, officer, director, associate, partner, proprietor or in any advisory capacity for any professional, business or organization (other than your City employment or appointment) from which you received or derived income of more than Yes No \$1.000.00?.... If YES, for each organization provide the following information: (see note above) Name & Type of Your +Amount of Income Organization Address Position By Category 3. In 2021, did you receive compensation in excess of \$5,000.00 for professional*, business or other services rendered to a person* or entity doing business* with the City of Chicago, the Chicago Transit Authority, Chicago Board of Education, Chicago Park District, Chicago City Colleges, or Metropolitan Pier and Exposition Authority? Yes If YES, provide the following for each person to which you provide Nature of Governmental Unit with +Amount of Income Name Service Which Person Did Business By Category 4. In 2021, did your spouse or domestic partner* receive compensation in excess of \$5,000.00 for professional*, business or other services rendered to a person* or entity doing business* with the City of Chicago, the Chicago Transit Authority, Chicago Board of Education, Chicago Park District, Chicago ☐ Yes ☑ If YES, provide the following for each person to which Spouse/ Domestic Partner provided services; Nature of Governmental Unit with +Amount of Income Name Service Which Person Did Business By Category In 2021, did any entity in which you OR your spouse or domestic partner* have a financial interest* receive compensation in excess of \$5,000.00 for professional*, business or other services rendered to any person* or entity doing business* with the City of Chicago, the Chicago Transit Authority, Chicago Board of Education, Chicago Park District, Chicago City Colleges, or Metropolitan Pier and Exposition Authority? Yes If YES, provide the following information about the entity in which you/spouse/domestic partner have a financial interes Name of Person to which Name Services were provided Nature of Governmental Unit with Amount of Income Service 19 Which Person Did Business By Category In 2021, did you have a financial interest* in any person* doing business* with the City? (Note: stock interests in publicly held corporations that represent less than ½ of 1% (.5%) of the company's outstanding stock, or demand deposits in financial institutions, or endowments, policies or annulties Yes No purchased from insurance companies, need not be disclosed.) If YES, provide the following for each person: Title or Description of Position Name Your held in This Person

that repre	esent less	than 1/2 of 1	% (.5%) o	the company's out companies, need no	standing st		posits in fin			its, policies
If YES, pro-	vide the fol	lowing for ea	alt person:			Ť	. —	· · ·		
Name		N	10			Type/Instrument of Ownership	` L	N	17	
				f \$5,000.00 or more						
		set(s) sold (in ole at top of t		address or legal desc	ription of the	e real estate) and the	e appropriate	Category of the	amount of gain rea	lized for each
		1	NI	*					+Amount of In By Category	come
forms of d	lirect or in	direct owne	ership, suc r mixed-us	* in real estate loca th as partnerships se building in which	or trusts w	hose corpus consi a financial interest	ists primárii *, answer "y	y of real estates	te. (If your princip estion.)	al place of
If YES, id		real estate b	y address	(see note at top of fo	orm for filer	s from certain depa	artments), in	cluding zip cod	le, or, if there is no	address, by
				NB						
of \$250.0	00?			n* (other than relativ			one or more	gifts having a	00 0	No No
If YES, id	entify the p	erson or pe	rsons from	whom you received	such gifts:	N .				1
					171	1-54				
In 2021, o	did you re	ceive any in	nproper gi	fts* that you dispose	ed of in acc	ordance with Secti	ion 2-156-1	44 of the Gove	ernmental Ethics (Ordinance? No
If YES, id	entify the i	mproper gift	(s), the do	nor(s) if known, and i	method of p	lisposal as specified	d in the ordin	nance		
					11/	3				
Name If you cur	the action	e or anyone	owes yo	u more than \$5,000	.00, did th	ction Requested	or guaranto	n of the debt of	A do business* with	or do work
making o contracte	of loans of ed, if the lo	the kind re ans are ma	ceived by de at the	ot include: (1) debt you in accordance prevailing rate of in vailable to the publ	with other terest; or (ic.)	terms and condition (2) debt instrument	ons standa s issued by	rd for such loa publicly held	ans at the time the corporations and	e debt was purchased
		ollowing info	rmation:				.			1
	f Debtor, or Guarar	ntor	N	13		e Person a Debtor, litor or Guarantor	M	Type o Instrun	1 1 1	19
and the same of th		Description of the control of the		nission (even if not	The second secon		or not for c	ompensation)	? Yes	No
120, pr	ovide life i	idino(o) or c	war a jay an	N	13	91.				
				* who is registered a overnment in the S					Secretary of State	e, the Cook
If YES, na	ame the lot	obyist(s) and	the lobby	st's relationship to yo	ou:	_	SCI			`.
Name(s))	N	1/8		R	elationship	111	A		
Do you no	w have an	y relative* o	domestic	partner* who is an e	mployee or	full- or part-owner	of a City con	tractor?	🗌 Yes 🔀	. No
Name(s) Relation) of	ve(s) or dom	estic partre	or(s), his/her/their relat	ionship to y Contractor(s	DI	or(s), and his	Position	on with the contract	or(s):
RIFICATION: ef it is true a	I declare t	ete. Lunders	tand that I	s Statement of Financ knowingly filing a Sta cluding discharge, in a	tement conf	aining false or misle:	ading inform	ation or failing	to file by deadline,	can result in
1	mi	تسك	2	-)	Signature	Bez	7)ec	2,20	22