

Chicago, IL 60654-8488 (312) 744-9660

3.

Name

CITY OF CHICAGO **2022 STATEMENT OF FINANCIAL INTERESTS**

To avoid a violation of the Governmental Ethics Ordinance and sanctions, including a \$250 per 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. Sedgwick, Suite 500, Chicago, IL 60654-8488

		sign it and then mail / deliver our form before returning it.	it to the Board	of Ethics. We can	not accept Statements	via e-mail or fax. Please ansv	ver
	 If you need more room, plea Terms with an asterisk (*) ar 						
	+ In questions 2-5 & 8, indicate A= \$25,000 or more			apital gain by writi C= less than \$5,00		ategory letter:	
	Office of Emergency Commu	nications or who are building	consumer pro	tection or health	inspectors need not d	vilian Office Police Accountabil isclose the address of business(perties owned, e.g.: "1 single-fan	es),
	Last Name: PIEM	ONTE	First	Name:	ABCIEL	Middle Initial:	=
	Address:			City: CH	-ICAGO State:	1C Zip Code: 60	16:
	Addicess.						
	City Department/Agency:				Title:		
1.	In 2021, were you employed by	any governmental unit other	than the City	of Chicago?		Yes 🗆 No	
	If YES, list the name of each gov	ernmental unit:	0.2.			· (51-480)	
	Cook	COUNTY	150A	RO OF	Comm	115510NERS	,
2.	In 2021, did you serve as an or organization (other than yo \$1,000.00?						Isiness
	4.11.64	Type of Organiza	ation	YERNMEN M		+Amount of Income By Category	
3.	In 2021, did you receive comp business* with the City of Chi Metropolitan Pier and Exposit	ensation in excess of \$5,00 cago, the Chicago Transit A ion Authority?	utnonty, Chic			endered to a person* or entity Constrict, Chicago City College Yes	doing jes, or
	If YES, provide the following for e	ach person to which you provid	ed services:	Governmenta	I Unit with	+Amount of Income	,
	Name	Service			Did Business	By Category	
4.	In 2021, did your spouse or do person* or entity doing busines City Colleges, or Metropolitan F	rier and Exposition Authority?.		had no spouse or o	domestic partner in 20	iness or other services rendere cation, Chicago Park District Cl 21 Yes No	d to a hicago
	If YES, provide the following for	each person to which Spous	se/ Domestic F	Partner provided se	ental Unit with	+Amount of Income	
	Name	Service		Which Per	rson Did Business	By Category	
5	In 2021, did any entity in wh \$5,000.00 for professional*, b Transit Authority, Chicago Bo	usiness of other services re	Park District	Chicago City C	olleges, or Metropol	itan Pier and Exposition Aut	ess of hicago hority?
	If YES, provide the following inf						
	Name	ornation about the emp		Name of Person Services were pr	to willow		
	Nature of Service		_	on Did Business		+Amount of Income By Category	
6	In 2021, did you have a financia less than ½ of 1% (.5%) of purchased from insurance con						oresent nnuities o
	If YES provide the following for	r each person:					

Title or Description of Position

Your held in This Person

	provide the follows	ng for each person:			Type/Instrument				
Nam	ne				of Ownership				
202	1, did you realiz	e a capital gain of	\$5,000.00 or m	ore from the sa	ale of any capita	al asset other to	han your princ	pal place of real Yes	idence lo
YES.	identify the asset(s	s) sold (including the at top of form).	address or legal de	escription of the r	eal estate) and the	appropriate Cat	legory of the amo	ount of gain realize	d for ea
(anne	eu asser (see rote	u top or torrij.						+Amount of Incor By Calegory	ne
orms (o you <u>currently</u> have a financial interest* in real estate located in the City of Chicago, other than your principal place of residence? Include all rms of direct or indirect ownership, such as partnerships or trusts whose corpus consists primarily of real estate. (If your principal place of sidence is in a multiple-unit or mixed-use building in which you have a financial interest*, answer "yes* to this question.) Yes No								
f YES		estate by address							
		• • •				. 1 .	•		
of \$25	50.00?	e from any persor				one or more gift	ts having an ag	gregate value in Yes X	exces: 0
YES	S, identify the pers	son or persons from	whom you receiv	ed such gifts:					
n 202	21, did you receiv	e any improper gil	íts* that you dispo	osed of in accor	dance with Secti	on 2-156-144 c	of the Governm	ental Ethic Ordi	nance
		roper gift(s), the dor						_ 165 Q 1	U
	,	•			oodar da apcomec	THE OF GIVE			
20.10	ou currently have	a financial interes	40 !	tl					
or an	inexation, zoning	a financial interes or rezoning of rea	al estate?				[☐ Yes	0
f YES ough	S, list the name of it or the action req	the person(s) in wh uested):	ich you have final	ncial interest and	d describe the Cit -	y action requesi	ted (including th	e nature of the a	opticati
Nam	ne :			Acti	on Requested				
If you <u>currently</u> owe or anyone owes you more than \$5,000.00, did the debtor, creditor or guarantor of the debt do business* with or do work for the City of Chicago in 2021? (Do not include: (1) debt instruments issued by financial institutions whose normal business includes the making of loans of the kind received by you in accordance with other terms and conditions standard for such loans at the time the debt was contracted, if the loans are made at the prevailing rate of interest; or (2) debt instruments issued by publicly held corporations and purchased by you on the open market at the price available to the public.) I neither owe nor am owed more than \$5,000.00 Yes									
/ VEC	3id- 4b - 6-11-			Themer	owe not an owe	ed more man \$	5,000.00 [Yes 🐴 N	0
	S, provide the follone ne of Debtor,	wing information:		Is the	Person a Debtor.		Type of Deb		
Cred	ditor or Guarantor				or or Guarantor	and the second	Instrument		
Do yo	ou now serve on	any board or comr	nission (even if n	ot a City board	or commission,	or not for comp	pensation)?	Yes N	0
(VES	S. provide the Nan	ne(s) of board(s) an	d your position(s)	on the board(s)					
,,,,,,									
		a covered relative	who is registere	d as a lobbuist	with the Oit to D				
o you	u currently have:	ther unit of local go		Oldic of Illinois	?	oard of Ethics,	the Illinois Seci	retary of State the	
o you county	u <u>currently</u> have a y Clerk, or any o		- 41 1-11 1-1- 1						
o you county YES,	, name the lobbyis	st(s) and the lobbyis	st's relationship to		itionship				
Oo you County YES, Name	, name the lobbyis	st(s) and the lobbyis		Rela	itionship	of a City contrac	tor? r	7 Vas	
Do you County YES, Name	e(s)	st(s) and the lobbyis	partner* who is an	Rela	ll- or part-owner				10
Do you County YES, Name To you YES, no Name	e(s)	st(s) and the lobbyis	partner* who is an	Rela	ll- or part-owner	or(s), and his/her			lo s):