

If YES, provide the following for each person:

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

To avoid a violation of the Governmental Effice Ordernos 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

Office of Emergency Co- organization(s) or propert house, 2 6-flats."	ns, filers in the Chicago Fire and Pol mmunications, or who are building, or by in questions 2 or 9; for question 9	consumer protection or b, however, they must lis	health inspectors need n	of disclose the address of bu	/siness(es),
ast Name: SANTO	Ϋ́	First Name:	CHICAGO	ate: IL Zip Code:	1000
ddr	Marie Company of the	City:	CHICACIO S	ate: _ I L _ Zip Code:	- ALA
ity Department/Agency:			Title:		
					rtr. No
	by any governmental unit other to	han the City of Chicago	7		No No
YES, list the name of each	governmental unit:				
				ennacity for any profess	ional husiness
organization (other than	an employee, officer, director, as n your City employment or appoi	intment) from which y	ou received or derived it	come of more man	No No
				L tes	\$ 100
	rovide the following information: (se	ee note above)	Your	+Amount	of Income
Name & Address	Organiza	tion	Position	By Categ	
	or each person to which you provide Nature of	ad services:	vernmental Unit with		No No nt of Income
Name	Service	Wh	ich Person Did Business	By Cate	egory
son* or entity doing busi y Colleges, or Metropolita	domestic partner* receive comness* with the City of Chicago, the Pier and Exposition Authority?	Thad no s	spouse or domestic partner		ik Distiller, Officage
ES, provide the following	for each person to which Spous		Governmental Unit with	+Amo	unt of Income
Vame	Service		Which Person Did Busine	ss By Ca	ategory
	which you OR your spouse of business or other services re	ndered to any perso Park District. Chica	ao City Colleges, or M	etropolitan Pier and Ex	
000.00 for professional*	Board of Education, Chicago	***************************************			THE RESERVE OF THE PARTY OF THE
000.00 for professional* nsit Authority, Chicago	Board of Education, Chicago		nestic partner have a fina	ancial interest:	
200.00 for professional* sit Authority, Chicago	Board of Education, Chicago	hich you/spouse/don	of Person to which	ancial interest:	
000.00 for professional* nsit Authority, Chicago	Board of Education, Chicago	hich you/spouse/don		ancial interest:	
200.00 for professional* sit Authority, Chicago	Board of Education, Chicago	hich you/spouse/don	of Person to which es were provided		mount of Income

Title or Description of Position Your held in This Person

	ased from insurance companies, n				□ res 💢	
Name Name	lowing for each person;	Type	e/Instrument			
		of O	wnership			
8. In 2021, did you rea	alize a capital gain of \$5,000.00 c	or more from the sale of	any capital asset	other than your pr	incipal place of r	esidence?
If YES, identify the ass identified asset (see no	set(s) sold (including the address or legote at top of form).	gal description of the real es	tate) and the approp	riate Category of the	Yes Spannount of gain real	
					+Amount of Ind By Category	
residence is in a mult	re a financial interest* in real estat direct ownership, such as partner tiple-unit or mixed-use building in	which you have a face	orpus consists prin	narily of real estate	ce of residence? c. (If your princip stion.)	Include all al place of
	eal estate by address (see note at to					
In 2021, did you rece of \$250.00?	eive from any person* (other than	relatives* or a domestic	: partner*) one or r	more gifts having a	n aggregate valu	e in excess
	rson or persons from whom you red				□ Yes §	₹ No
In 2021, did you recei	ve any improper gifts* that you di	isposed of in accordance	with Section 2-15	56-144 of the Gove	rnmental Ethics	Ordinance?
					🗆 Yes 🧏) No
If YES, identify the imp	proper gift(s), the donor(s) if known	, and method of disposal	as specified in the	ordinance		
or armonadon, zorning	e a financial interest* in any pers g or rezoning of real estate?				Yes	No
ryES, list the name of sought or the action req	the person(s) in which you have fi quested):	inancial interest and desc	ribe the City action	n requested (includi	ng the nature of	the application
Name		Action Re	quested			
naking of loans of the ontracted, if the loans y you on the open ma	anyone owes you more than \$5 o in 2021? (Do not include: (1) kind received by you in accordate are made at the prevailing rate rket at the price available to the	ance with other terms a of interest; or (2) debt public.)	ed by financial ins and conditions sta instruments issue	stitutions whose n andard for such load ed by publicly held	ormal business	includes th
		I neither owe i	nor am owed mor	e than \$5,000.00	☐ Yes	No No
YES, provide the follow	ving information:	In the Passe	Patter [
Name of Debtor,		Is the Perso Creditor or 0		Type of Instru	of Debt ment	
Creditor or Guarantor						
	ny board or commission (even it	f not a City board or co	mmission, or not	for compensation)?	V No
you now serve on a	ny board or commission (even in eqs) of board(s) and your position(mmission, or not	for compensation)?	× No
you now serve on a			mmission, or not	for compensation)?	X No
o you now serve on a	e(s) of board(s) and your position((s) on the board(s):				× No
o you now serve on all YES, provide the Name		(s) on the board(s):	he City's Board o	f Ethics, the Illinoi		No No State, the Co
o you now serve on an YES, provide the Name you <u>currently</u> have a unty Clerk, or any oth	c(s) of board(s) and your position(covered relative* who is registe er unit of local government in the	(s) on the board(s): pred as a lobbyist with the State of Illinois?	he City's Board o	f Ethics, the Illinoi	s Secretary of S	
o you now serve on all (ES, provide the Name) you currently have a inty Clerk, or any oth	e(s) of board(s) and your position((s) on the board(s): pred as a lobbyist with the State of Illinois?	he City's Board o	f Ethics, the Illinoi	s Secretary of S	
you currently have a unity Clerk, or any oth	c(s) of board(s) and your position(covered relative* who is registe er unit of local government in the	red as a lobbyist with the State of Illinois?	he City's Board o	f Ethics, the Illinoi	s Secretary of S	
you <u>currently</u> have a unty Clerk, or any oth ES, <u>name the lobbyist(</u> me(s)	e(s) of board(s) and your position(covered relative* who is registe er unit of local government in the (s) and the lobbyist's relationship	red as a lobbyist with the State of Illinois? to you: Relationst an employee or full- or page.	he City's Board o	of Ethics, the Illinoi	s Secretary of S	No No

VERIFICATION: I declare that I have examined this Statement of Financial Interests, including any accompanying uccuments, and the belief it is true and complete. I understand that knowingly filing a Statement containing false or misleading information or failing to file by deadline, can removal from office or in employment sanctions, including discharge, in accordance with applicable rules, regulations and ordinances of the City of Chicago.

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Signature and Date

