

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 Covermental Ethis 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

Board of Ethics

Please complete this form, sign it and then mail / deliver it to the Board of Ethics. We cannot accept Statements via e-mail or fa 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 26-flats Vitale Chloe Last Name: First Name Middle Initial: С State: Illinois Zip Code: 606 Address: Chicago City Department/Agency: ECPS Police District 12 - District Council District Councilor 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 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 X Yes No If YES, for each organization provide the following information: (see note above) Name & Type of +Amount of Income Your Nonprofit City Bureau Documenter wages Address Organization 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 X No If YES, provide the following for each person to which you provided services. Nature of Governmental Unit with +Amount of Income Name Service Which Person Did Business By Calegory 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 No 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 interest. Name of Person to which Services were provided Nature of Governmental Unit with +Amount of Income Service Which Person Did Business By Category

if YES, provide the following for each person,

Name Title or D

purchased from insurance companies, need not be disclosed.)

Title or Description of Position
Your held in This Person

Yes No

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 annuities

| that repre or annuiti | esent less than les purchased | 1/2 of 1% (.5%) of the from insurance cor | in any person* conduct ne company's outstand npaniës, need not be d | ng stock, or dem | and deposit | ts in financial | institutions, or e | icly held corp andowments, Yes X N | policies |
|--|---|---|--|---|---|--|---|--|-------------------------------|
| Name | vide the following | for each person. | | Type/inst of Owner | | | | | |
| | | | 5,000.00 or more from | the sale of any | capital ass | | | | |
| If YES, Iden | ntify the asset(s) | sold (including the ac | ktress or legal description | | | | | | |
| rgentinea as | ssel (see note a! | top of form). | | | | | | mount of Incor Category | ne 📗 |
| forms of d residence | irect or indirect is in a multiple | t ownership, such -unit or mixed-use | n real estate located in as partnerships or trus building in which you h | sts whose corpus lave a financial in | s consists paterest*, and | orimarily of re swer "yes" to | eal estate. (If you | | place of |
| if YES, ide legal desc | | state by address (s | ee note at top of form fo | r filers from certa | in departme | nts), including | g zip code, or, if | there is no ac | ldress, by |
| . In 2021, c of \$250.0 | did you receive | from any person* | (other than relatives* o | r a domestic par | Iner*) one c | or more gifts | having an aggre | egate value in Yes 🔲 N | |
| If YES, Ide | entify the perso | n or persons from w | hom you received such | gifts | | | | | |
| | | | that you disposed of in | | | | | | |
| If YES, Ide | entify the Impro | per gift(s), the dono | (s) if known, and metho | d of disposal as s | pecified in ti | he ordinance | | | |
| If YES, list sought or Name | ation, zoning of the name of the the action required | or rezoning of real enter person(s) in which ested): | in any person* who in estate? | rest and describe | the City act | lon requested | d (including the r | Yes N | lo pplication |
| for the Ci making of contracted by you on | ity of Chicago f loans of the l d, if the loans the open mai | in 2021? (Do not kind received by you are made at the pro | include: (1) debt instruction in accordance with continuous managements in accordance with continuous in accordance with a continuous managements in accordance with a continuous in accordanc | ments issued by other terms and or (2) debt instr | y financial conditions s uments iss | institutions wastandard for ued by public | hose normal b such loans at th cly held corpora | usiness inclu ne time the d | des the ebt was rchased |
| if YES, pro | ovide the follow | ing information | | | | | | | |
| Name of Creditor | Debtor, or Guarantor | | | Is the Person a l Creditor or Guar | | | Type of Debt Instrument | | |
| Do you no | ow serve on ar | ny board or commis | ssion (even if not a City | board or commi | ssion, or no | ot for comper | nsation)? | Yes X N | lo |
| If YES, pro | ovide the Name | (s) of board(s) and | your position(s) on the b | oard(s): | | | | | |
| | | | who is registered as a lo rernment in the State of | | | | | ary of State, the Yes X | |
| | | (s) and the lobbyist! | s relationship to you: | 7 | | | | | |
| Name(s) | 1, | | | Relationship | | | | | |
| | | | irtner* who is an employe | | | | | - | lo |
| Name(s) Relations | of | Harrison September | Contra | | (ABB016/13/ | | sition | - A SAME AND THE | |
| ief it is true a | ind complete. I | understand that kno | Statement of Financial Inte owingly filing a Statement idling discharge, in accorda | containing false o | r misleading | information o | r failing to file by | deadline, can | result in |
| | | . (1 | | | | | 11/21/2 | 022 | |
| | | | Signat | ture and Date | | | | | |