

CITY OF CHICAGO 2017 STATEMENT OF FINANCIAL INTERESTS

To avoid a vinit to the control of t

	(312) 744-	9660				dgwick, Ste		90.1	60654-8488	
form - If y	ase complete this f nats. Please answe ou need more roon ms with an asterisl	r all 16 questior 1, please attach	then mail / ns and sign a and label ex	deliver it to and date vo ktra shouts	the Board	of Ethics . V	le cannot a			or PDF
NOT	questions 2-5 & 8, i A= \$25,000 or E: for security reaso Office of Emergency tions 2 or 9; for que	more B= ns, filers in the C Communication	\$5,000 - \$2 the Color ns and build	4,999 Official ling inspector	C= less h epartment ors need no	E Control	eneral of	ffice, Independent	dent Police Review	CELVED
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Last Na	me: Leoi	\land	First Na	me: E	liza	bet	Midd	le Initial:	A Jak	
Mailing	Address:						City	Sta	ite: Zip:	
City De	partment/Agency:					Titl	e: 			
1. In 20	116, were you emplo	yed by any gove	rnmental un	it other than	the City of	Chicago?			Ye	s No
	, list the name of governmental unit									
professi	16, did you serve as onal, business or oth	er organization	(other than	your City er	nployment	t or appoint	ment) from	which you rece	eived or	152/11
	income of more tha ES, for each organiza						***********************		Yes	, Mo
Name & Address				oe of anization:			Your Position		+ Amount of By Category	Income,
business	6, did you receive c * with the City of Ch litan Pier and Expos	iícago, the Chica	go Transit Au	uthority, Chi	cago Board	of Education	, Chicago Pa	ark District, Chi	icago City Colleges	, or
If YE	S, provide the follo	wing for each pe	rson or entity	y to which y	ou provided	d services:			∐ Yes	™ No
Name			Nature of Service				Unit With Which ty Did Business		+ Amount of I By Category	ncome,
work or o	6, did your spouse other services rende	red to a person*	or entity doi	ng business	* with the C	ity of Chicag	o, the Chica	go Transit Auti	ional*, business, e hority, Chicago Boa	mployment, ard of
Educatio	n, Chicago Park Dist	rict, Chicago City	/ Colleges, o	Metropolita	an Pierand	Exposition A d no spouse	uthority? or domestic	partner in 201	6. Tyes	No
If YE	S, provide the follow	ving for each per	rson or entity	to which Sp	oouse/ Don	nestic Partne	provided s	ervices:		
Name			Nature of Services				init With Which y Dld Business		+ Amount of I By Category	ncome,
for profes	6, did any entity in v ssional*, business or Board of Education,	other services re	endered to a	ny person* o	or entity doi	ng business*	with the Ci	ty of Chicago, 1	the Chicago Transi	t Authority,
If YE	S, provide the follow	ring information	about the er	ntity in whic	h you/spou	se/domestic	partner hav	e a financial in	terest:	
Name						f Person or Entity swere provided	r to which			
Nature of Services				mment Unit V h Person Did I					+ Amount of Incom By Category	е,
represent	, did you have a fina less than 1/2 of 1% rannuities purchase	(.05%) of the cor	npany's outs	tanding con	nmon stock	or time or	demand dep	oosits in financ	ial institutions, or e	endowments,
If Y	ES, provide the follo	wing for each n	erson:						Yes	No
Name						Title or	Description	of Position		

ii i co, provide t	he following for each perso	n:						
lame				Type / Ir Ownersi	strument of			
In 2016, did you re	ealize a capital gain of \$5,00	0.00 or more fro	om the sale of any ca	pital asset o	ther than your	orincipal pla	ace of	
If YES, identify the	asset(s) sold (including the dentified asset (see note at t	address or legal						
						+ Amor Catego	unt of gain , By ry	
rms of direct or ind	have a financial interest* in irect ownership, such as par iple-unit or mixed-use build	rtnerships or tru	ists whose corpus co	nsists prima	rily of real estat	e. (If your r	orincipal place	nclude all of No
If YES, identify the legal description	ne real estate by address (see ::	e note at top of	form for filers from c	ertain depa	rtments), includ	ding zip cod	le, or, if there	is no addr
gregate value in ex	eceive from any person* (ot			artner*) one	or more gifts h	aving an	☐ Yes	N
If this, identify the	e person or persons from w	hom you receiv	ed such gifts:					
In 2016, did you re	eceive any improper gift* th	at you disposed	of in accordance wi	ith Section	2-156-144 of the			
vernmental Ethics (Ordinance?						Yes	Ŋ N
ii 103, identity the	e improper gift(s), the dono	r(s) if known, ar	nd method of dispos	al:				
anchise, or any pe YES, list the name	have a financial interest* in rmit for annexation, zoning of the person(s) in which yo or the action requested):	or rezoning of	real estate?				☐ Yes	☑ re of the
ranchise, or any pe f YES, list the name	rmit for annexation, zoning of the person(s) in which yo	or rezoning of	real estate?				☐ Yes	☑ re of the
ranchise, or any per YES, list the name pplication sought of lame If you surrently on the City of Chicago is of the kind you rest are made at the part of the part	rmit for annexation, zoning of the person(s) in which you the action requested): we or anyone owes you mo in 2016? (Do not include: the person of the perso	or rezoning of ion have the fination have the fination of the fination of the fination of the first terms and or (2) debt instrum	ncial interest and de ncial interest and de ncial interest and d	editor or gu	Action Requested arantor of the cons whose nor consorations are	debt do bus	yes ding the natu siness* with o ss includes the vas contractes	r do work e making d, if the
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