

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

Name

CITY OF CHICAGO 2019 STATEMENT OF FINANCIAL INTERESTS

To avoid a violation of the Governmental Ethics Ordinance and sanctions, including fines and having your name and violation being made public, you must return this form, completed and signed, **no** later than the close of business Friday, May 31, 2019 to:

Board of Ethics 740 N. Sedgwick, Ste. 500 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, fax or PDF formats. Please answer all 16 questions and sign and date 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, Inspector General's Office, Civilian Office of Police Accountability and Office of Emergency Communications and building and health inspectors need not disclose the address of business(es), organizations or property in questions 2 or 9; for question 9, however, they <u>must</u> list the n<u>umber</u> and <u>types</u> of properties owned, for example: two 6-flats, etc.

		First N	ame: 			Middle In –	itial:		
ailing Address:					City:		State:	Zip:	
ity Department/Board r Commission:					Title:				
In 2018, were you employ	ed by any governr	nental u	nit other than th	e City of	Chicago?			Yes	_ N
If YES, list the name of each governmental unit									
In 2018, did you serve as a ofessional, business or otherived income of more than	er organization (ot n \$1,000.00?	ther tha	n your City emp	oloymen	t or appointme	nt) from whi	ch you received		
If YES, for each organizat	tion provide the fo	llowing	information: (see	e note ab	oove)			7	
ame & ddress:			ype of grganization:			our osition		+ Amount of Ind By Category	come,
In 2018, did you receive co siness* with the City of Chi etropolitan Pier and Exposi	icago, the Chicago	Transit	Authority, Chicag	go Board	l of Education, Cl	nicago Park (District, Chicag		
If YES, provide the follow	ving for each perso	on or en	tity to which you	provide	d services:				ш.
ame	I .	Nature o Service	f		Government Unit Person or Entity D			+ Amount of Ind By Category	come,
In 2018, did your spouse or ork or other services render lucation, Chicago Park Distr	red to a person* or	r entity c	loing business* v	with the (P <u>ier</u> and	City of Chicago, t	he Chicago ⁻ ority?	Fransit Authori		
If YES, provide the follow	ving for each perso	on or en	tity to which Spo	ouse/ Dor	mestic Partner pr	ovided servi	ces:		
	N	on or en Nature o Services		ouse/ Dor	Government Unit	With Which	ces:	+ Amount of Inc By Category	come,
If YES, provide the followame In 2018, did any entity in r professional*, business or nicago Board of Education, of the followall of the foll	which you OR you other services ren Chicago Park Distr	Nature of Services ur spou Idered to rict, Chic	se or domestic po any person* or ago City College:	partner* entity do s, or Meti	Government Unit Person or Entity D have a financial ping business* wi ropolitan Pier an	With Which id Business interest* rec th the City of the Exposition	eive compensa of Chicago, the Authority?	By Category Ition in excess of Chicago Transit A	\$5,000.0
In 2018, did any entity in r professional*, business or licago Board of Education, lif YES, provide the follow	which you OR you other services ren Chicago Park Distr	Nature of Services ur spou Idered to rict, Chic	se or domestic po any person* or ago City College:	partner* entity do ss, or Meti you/spoi	Government Unit Person or Entity D have a financial ping business* wi ropolitan Pier an	With Which id Business interest* recth the City of Exposition	eive compensa of Chicago, the Authority?	By Category Ition in excess of Chicago Transit A	\$5,000.0 Authorit
In 2018, did any entity in professional*, business or icago Board of Education, If YES, provide the followame	which you OR you other services ren Chicago Park Distr	Nature of Services ur spoundered to crict, Chicon bout the	se or domestic po any person* or ago City College:	partner* entity do s, or Meti you/spot Name Service	Government Unit Person or Entity D have a financial bing business* with ropolitan Pier an use/domestic pa	With Which id Business interest* recth the City of Exposition	eive compensa of Chicago, the Authority? financial intere	By Category Ition in excess of Chicago Transit A	\$ \$5,000.0 Authorit
In 2018, did any entity in r professional*, business or nicago Board of Education,	which you OR you other services ren Chicago Park Distriction and interest* in a control of the comp	ur spoudered to cite, Chico	se or domestic po any person* or ago City College: e entity in which overnment Unit Withich Person Did Buttern doing busing	partner* entity do s, or Meti you/spoi Name Service ith usiness uess* with	Government Unit Person or Entity D have a financial bing business* wiropolitan Pier an use/domestic pa of Person or Entity to es were provided in the City? (Note of time or dem	with Which id Business interest* recth the City of Exposition rtner have a which	eive compensa of Chicago, the Authority? financial interes + A By ock interests in	By Category Ition in excess of Chicago Transit A	\$5,000.0 Authorit

You Held in This Person

companies that represent I	inancial interest* in any person* con ess than 1/2 of 1% (.5%) of the comp ts, policies or annuities purchased fr	oany's outstanding co	ommon stock, o	r time or dem	nand deposits in		
If YES, provide the follo	owing for each person:						
Name			Type / Instr Ownership	ument of			
•	a capital gain of \$5,000.00 or more fr	•	•			¬ v	□ N-
If YES, identify the asset(s) sold (including the address or lega ed asset (see note at top of form).					Yes ne amou	∐ No nt of gain
					+ Amount of g	gain , By	
orms of direct or indirect o	a financial interest* in real estate loca ownership, such as partnerships or tr nit or mixed-use building in which y	rusts whose corpus co	onsists primarily	of real estate	e. (If your prin <u>cip</u>	al place	
If YES, identify the real legal description:	estate by address (see note at top o	of form for filers from	certain departr	nents), includi	ng zip code, or,	if there i	s no address,
ggregate value in excess o	e from any person* (other than relat of \$250.00?son or persons from whom you rece				ving an	Yes	☐ No
overnmental Ethics Ordin	e any improper gift* that you dispos nance? proper gift(s), the donor(s) if known,					Yes	☐ No
* *	for annexation, zoning or rezoning on eperson(s) in which you have the fire action requested):					Yes the natu	re of the
or the City of Chicago in 20 bans of the kind you receiv	·	uments issued by fina and conditions stand truments issued by p	ncial institution ard for such loa	rantor of the cons whose noruns at the time roorations and	mal business inc the debt was co d purchased by y	ludes the intracted	e making of d, if the
Name of Debtor, Creditor or Guarantor		Is the Person a I Creditor or Gua			Type of Debt Instrument		
•	board or commission either as a volunte me(s) of board(s) and your position(s	·	(include non-City	boards or comi	missions)?	Yes	☐ No
	a relative* or domestic partner* wh	_	bbyist with the	City's Board o	f Ethics?	Yes	☐ No
Name(s)				Relationship			
If YES, name the relative	a relative* or domestic partner* who (s) or domestic partner(s), his/her/th		·	•		Yes sition w	☐ No ith the
contractor(s): Name(s)/ relationship(s)	Conf	tractor(s)		Pos	ition(s)		
and belief it is true and co	e that I have examined this Statement of omplete. I understand that knowingly fi rom office, or employment sanctions, inc	lling a Statement contai	ning false or misl	eading informat	tion, or failing to fi	le by the	deadline, can