

Boardof Sthics

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

CITY OF CHICAGO 2024 STATEMENT OF FINANCIAL INTERESTS

To evoid a violation of the Governmental Ethics Ordinance and sanctions, including a \$250 per day time until you tile and having your name and violation being made public, you must return this form no later than the close of business Wednesday, May 3, 2024 to: Board of Ethics, 740 N. Sedgwick, Suite 500, Chicago, H. 60654-8488.

Please complete this form, sign it and then mail / deliver it to the Board of Ethics. Please enswer all 17 questions and sign and date your form before returning it. If you need more room, please stach and label extra sheets. Terms with an esteriak (*) are defined on . In questions 2-6 & 8, indicate the appropriate income, compensation or capital gain by writing in the appropriate category letter: B= \$5,000 - \$24,999 C= less than \$5,000 NOTE: for security reasons, filers in the Chicago Fire and Police Departments, OPSA, CCPSA, Inspector General's Office, Civilian Office of 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 8; for question 8, however, they must list the number and types of properties owned, e.g.: "I single-family house; 2 6-flets." Last Name: Vasquez First Name: Patricla Middle Initial: M City: State ZID: City Department / Agency: 1. In 2023, were you employed by any governmental unit other than the City of Chicago?... 🖾 Yes 🔲 No if YES, list the name of each governmental unit Circuit Court In 2023, did you serve as an employee, officer, director, senciate, pertner, 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 \$1000? ☐ Yes ☑ No If YES, for each organization provide the following information (see note above: Name & Your Position: Type of art of incom Address Organizations Metropolitan Pier and Exposition Authority? If YES, provide the following for each person to which you provided services: I had no spouse or domestic partner in 2023. Amount of Inco which person did business Services ar* receive compensation in excess of \$5000 for professional*, business or other services 2023, dild your spouse or domestic perteer* receive compensation in oucess of \$5000 for professional", business or other services red to a person* or entity doing business* with the City of Chicago, Chicago Transit Authority, Board of Education, Chicago Park District, Chicago City Colleges, or Metropolitan Plar and Esposition Authority?

I had no spouse or domestic partner in 2023.

Yes
No If YES, provide the following for each person to which Spouse/Domestic Partner provided services: Governmental Unit with which person did business ount of inco Nature of Service: 5. In 2023, did any antity in which you OR your sy sticpertner* have a fine t^a receive compensation in excess of \$5000 for loss rendered to any person* or entity doing business* with the City of Chicago, Chicago Transit Authority, Board Inicago City Colleges, or Metropolitan Pier and Exposition Authority? of Education, Chicago Perk District, Chicago City Colleges, or Metropolitan Pier and Exposition Authority?. If YES, provide the following information about the entity in which you/your spouse/your domestic partner have a financial interest: Name of person to which services were provided Governmental Unit with which person did business Amount of Incor by category 6. In 2023, did you have a financial interest* in any person* doing business* with the City? (Note: Stock interests in publicly held corporations that represent less then 1/2 of 1% (.5%) of the company's outstanding stock, or demand deposits in financial institutions, or endowments, polici polides or No annuities purchased from insurance companies, need not be disclosed). ... If YES, provide the following for each person: Title or Description of Position You Held in This Person 7. In 2023, did you have a financial interest* in any person* conducting business* in Chicago? (Note: Stock interests in publicly held corporations that represent less than 1/2 of 1% (.5%) of the company's outstanding stock, or demand deposits in financial institutions, or endowments, policies or annuities purchased from insurance companies, need not be disclosed.). Yes X No If YES, provide the following for each person: Type / Instrument of Name: Ownership

| | for each identified asset (see note at top of form) Amount of lecome by category |
|-------|--|
| | 9. Do 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 forms |
| | of direct or indirect ownership, such as partnerships or trusts whose corpus consists primarily of real estate. (If your principal place of residence is in a multiple-unit or relead-use building in which you have a financial interest", answer "yes" to this question.) |
| | |
| | 19. In 2023, did you receive from any person® (excluding reletives® or a domestic pertner®) one or more gifts having an appropria value in excess of |
| | \$2507 |
| | icros juvenity the second persons ment you received such gains |
| | 11. In 2023, did you receive any improper gifts" that you disposed of in accordance with Section 2-156-144 of the Governmental Ethics |
| | Ordinence? Yes 🔀 No |
| | if YES, identify the improper quit(s), the donoris) if known, and method of disposal as specified in the Ordinance: |
| | |
| | 12. Do you surrently have a financial interest* in any person* who in 2023 applied to the City of Oxicago for a license or financhise, or any permit for annexation, zoning or rezoning of real estate? |
| | If YES, list the name of the person(s) in which you have a financial interest and describe the City action requested (including the nature of the application is ought or the action requested. |
| | |
| | Name: Action Requested 13. If you <u>currently</u> owe or anyone owes you more than \$5000, did the debtor, creditor or guarantor of the debt do business" with or do work for the |
| | City of Chicago in 2023? (Do not include: (1) debt instruments issued by financial institutions whose normal business includes the making of loans of the time time the debt was contracted, if the loans are |
| | made at the preveiling 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.) |
| | If YES, provide the following information: |
| | Hame of Debtor, Creditor Is the person a Debtor, Type of Debt |
| | or Guaranton: Creditor or Guaranton? Instrument 14. Do you now serve on any board or commission (even if not a City board or commission, or not for compensation)? |
| | if YES, provide the Name(s) of board(s) and your position(s) on the board(s); |
| | |
| | 19. Do you carrendly have a covered relative? who is registered as a lobbyts with the City's Board of Ethics or the Illinois Secretary of State? |
| | ☐ Yes ☒ Mo |
| | If YES, name the lobbyist(s) and the lobbyist s relationship to your |
| | Nume(s): Relationship |
| | 14. Do you now have any relative? or domestic partner? who is an employee or full-or part owner of a City contractor? — Yes No if YES, name the relative's) or domestic partner(s), his/her/their relationship to you, the city contractor(s), and his/her/their position with the contractor(s). |
| | Neme(s) and References (s) Position(s) |
| | 17. Am you carrenty a City Council amplicant of City Council contracted? |
| | If YES, provide the name(s) of each City Council member, City Council Committee or City Council Bureau for whom you work: |
| | |
| | |
| | VERIFICATION: I declare that I have examined this Statement of Financial Interests, including any accompanying statements, and to the |
| | pest of my knownedge and belief it is true and complete. Lunderstand that knowlnow filling a Statement contribute false as military filling a Statement contribute false as military filling as the contribute false as military false. |
| | information or falling to file by deadline, can result in removal from office or in employment sanctions, including discharge, in accordance with applicable rules, regulations and ordinances of the Oty of Chicago. |
| | Potri: no Mar. |
| | Policia M. Vasqua 4-29-2024 |
| | Signature and Date Print Form |
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