

(312) 744-9660

Name

CAN CITY OF CHICAGO City of Chicago

To avoid a violation of the Governmental Ethics Ordinance and sanctions, including a \$250 per violation that 2022 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. 60654-9488

Please complete this form, sign it and then mail / deliver it to the Board of Ethics. We cannot accept Statements via e-mail or fax. Please answer 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 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, 2 6-flats." Last Name: First Name: Middle Initial: Address: City Department/Agency 1. In 2021, were you employed by any governmental unit other than the City of Chicago? 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 \$1,000.00?... Yes If YES, for each organization provide the following information: (see note Name & Type of +Amount of Income ECCSC Noh pertur. Address Organization 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 No If YES, provide the following for each person to which you provided services Nature of Governmental Unit with +Amount of Income Name Service By Category Which Person Did Business 4. In 2021, dld 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 Dld 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 TY No If YES, provide the following information about the entity se/domestic partner have Name of Person to which Name Services were provided Nature of Governmental Unit with +Amount of Income Service By Category Which Person Dld Business 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 of annuities purchased from insurance companies, need not be disclosed.) Yes Y No If YES, provide the following for each person:

Title or Description of Position

Your held in This Person

that represent less than	financial interest* in any person* cond % of 1% (.5%) of the company's outsta from insurance companies, need not b	nding stock, or demand de	posits in financial ins		nts, policie
If YES, provide the following	for each person:	Type/Instrument			
Name		of Ownership			_
In 2021, did you realize	a capital gain of \$5,000.00 or more fr	rom the sale of any capita	asset other than yo	our principal place of	residence No
If YES, identify the asset(s) dentified asset (see note at	sold (including the address or legal descrip-	tion of the real estate) and the	appropriate Category	of the amount of gain re	alized for ea
				+Amount of By Category	
forms of direct or indirect residence is in a multiple	financial interest* in real estate located t ownership, such as partnerships or -unit or mixed-use building in which yo	trusts whose corpus consi ou have a financial interest	sts primarily of real of answer "yes" to this	estate. (If your princi s question.)	pal place o
If YES, identify the real e legal description	state by address (see note at top of form	n for filers from certain depa	rtments), including zip	ocode, or, if there is n	o address,
In 2021, dld you receive of \$250.00?	from any person* (other than relatives	s* or a domestic partner*) o	one or more gifts hav	ing an aggregate valu	ue in exces
If YES, identify the person	n or persons from whom you received su	och gifts:			
	any improper gifts* that you disposed				
					_ 140
TYES; identify the improj	per giff(s), the donor(s) if known, and me	thed of disposal as specified	in the ordinance		
	rezoning of real estate?				_
Name	raiso).	Action Requested			
for the City of Chicago making of loans of the I contracted, if the loans by you on the open man		struments issued by finan th other terms and condition est; or (2) debt instrument	cial institutions whose ons standard for suc s issued by publicly	se normal business in the time the time the corporations and the time the t	includes the he debt was d purchase
Name of Debtor, Creditor or Guarantor	ng mornation.	Is the Person a Debtor, Creditor or Guarantor	1 1 1	pe of Debt strument	
Do you now serve on ar	y board or commission (even if not a	City board or commission,	or not for compensal	tion)? Tyes	No
If YES, provide the Name	(s) of board(s) and your position(s) on th	e board(s):			
Do you over the boys o	annead relation to the in an eleteration	a labelinidat viith tha Oik ta D	and of Fabine she life	noin Constant of Cha	- 1/0-
County Clerk, or any oth	covered relative* who is registered as ier unit of local government in the State				No No
Name(s)	(s) and the lobbyist's relationship to you:	Relationship			1
Do you now have any rela	tive* or domestic partner* who is an emp	loyee or full- or part-owner	of a City contractor?	Yes	No.
YES, name the relative(s)	or domestic partner(s), his/her/their relation	nship to you, the city contracto	r(s), and his/her /their (position with the contract	ctor(s):
Name(s) of Relationships	Cor	ntractor(s)	Position	n	
f it is true and complete. I	nave examined this Statement of Financial understand that knowingly filing a Staten ment sanctions, including discharge, in acco	nent containing false or misles ordance with applicable rules,	ading information or fai regulations and ordinal	ling to file by deadline	, can result
	/ Al A	- 11 1	6/22		
9	Sig	gnature and Date	(e		