

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 Governmental Ethics 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 of the Complete this form, sign it and then mail / deliver it to the Board of Ethics. all 16 questions and sign your form before returning it. If you need more room, please attach and label extra sheets. Received 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: B= \$5,000 - \$24,999 A= \$25,000 or more 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. VAV2ICK Last Name: First Name: Middle Initial: Address: POLICE DISTARCT City Department/Agency: 16th Title: DISTRIC 1. In 2021, were you employed by any governmental unit other than the City of Chicago? X 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 If YES, for each organization, provide the following information: (see note above) Name & +Amount of Income Type of Your 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 No If YES provide the following for each person to which you provided service Nature of Governmental Unit with +Amount of Income Name Service Which Person Did Business By Category 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 Name Services were provided Nature of Governmental Unit with +Amount of Income Service Which Person Did Business By Category 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

Title or Description of Position

Your held in This Person

Yes No

purchased from insurance companies, need not be disclosed.) .....

If YES, provide the following for each person

Name

that represent les	ss than 1/2 of 1% (.5%)	est* in any person* conduct of the company's outstand e companies, need not be	ling stock, or demand d	eposits in financial institu		nts, policies
If YES, provide the t	oliowing for each person	n;				
Name			Type/Instrumer of Ownership	nt		
In 2021, did you	ealize a capital gain	of \$5,000.00 or more from	n the sale of any capit	al asset other than your	principal place of	residence?
		ha address or legal description	n of the real estate) and th	e appropriate Category of t	he amount of gain re	alized for eacl
dentified asset (300	note at top of form).				+Amount of By Calegory	
forms of direct or residence is in a r	indirect ownership, s nultiple-unit or mixed-	est* in real estate located in such as partnerships or tru- use building in which you	sts whose corpus con- have a financial interes	sists primarily of real est	ate. (If your princi	pal place of
	e real estate by addres	ss (see note at top of form f	or filers from certain dep	artments), including zip o	ode, or, if there is r	no address, b
		son* (other than relatives*				ue in excess
If YES, Identify the	person or persons fro	om whom <b>you</b> received such	giffs:			
		gifts* that you disposed of				
		donor(s) if known, and methi			11-2	
for annexation, z  If YES, list the na sought or the action	oning or rezoning of r me of the person(s) in	rest* in any person* who in real estate? which you have financial int	erest and describe the C		Yes 1	No No
Name			Action Requested			
for the City of C making of loans contracted, if the by you on the op	hicago in 2021? (Do of the kind received to loans are made at the	you more than \$5,000.00, not include: (1) debt instiby you in accordance with the prevailing rate of interese e available to the public.)	ruments issued by fina other terms and condi at; or (2) debt instrumen	incial institutions whose tions standard for such I nts issued by publicly he	normal business oans at the time t ld corporations an	includes the he debt was
	e fallowing information	10)	1			
Name of Debtor Creditor or Guar	· I		Is the Person a Debto Creditor or Guarantor	,   ,,,,,	of Debt ument	
Do you now serv	e on any board or co	mmission (even if not a Cit	y board or commission	, or not for compensatio	n)? 📉 Yes 🛭	] No
		and your position(s) on the				
Do you currently	have a covered relative	ve* who is registered as a government in the State	obbyist with the City's	Board of Ethics, the Illino	is Secretary of Sta	
		byist's relationship to you.	or minors r			No No
Name(s)			Relationship			
Do you now have	any relative* or domes	stic partner* who is an emplo	yee or full- or part-owne	r of a City contractor?	Yes	<b>⊘</b> No
f YES, name the le	ative(s) or domestic par	fner(s), his/her/their relations	nip to you, the <b>city contrac</b>	tor(s), and his/her /their po.	sition with the contra	ctor(s):
Name(s) of Relationships		Contr	actor(s)	Position		
ef it is true and com	plete. I understand tha	this Statement of Financial In at knowingly filing a Stateme including discharge, in accor	nt containing false or misl	eading information or failing	g to file by deadline	e, can result in
0	a 1/1/4	4	10.137	_	,	-
U	V	Sign	alure and Date			