

City of Chicago
Department of Revenue
121 N. LaSalle Rm107

45 03/09/06 10:56 Batch 11808 WalkIn n
ch-rm10707

Tickets	
09054708868	\$50.00
License Plate: ANMARI9-IL	
Admin Hearings -- Administrative Costs	
06DS001008	\$25.00
Admin Hearings with Referral	
06DS001008	\$200.00
Admin Hearings -- Administrative Costs	
06DS001917	\$25.00
Admin Hearings with Referral	
06DS001917	\$200.00
Admin Hearings -- Administrative Costs	
06DS001918	\$25.00
Admin Hearings with Referral	
06DS001918	\$200.00
Admin Hearings -- Administrative Costs	
06DS001924	\$25.00
Admin Hearings with Referral	
06DS001924	\$200.00
Personal Check	\$950.00
Total Amount Paid	\$950.00

Thank you

- Retrieve Image
- Printer Friendly

Ticket - Primary Detail

NAVIGATION

- Next Detail
- Previous Detail
- Transactions
- Secondary Detail
- Add Note
- Notice Detail

CONTROLS

VIOLATION CODE

METER

CORPORATION

Updated By: GEOCODE

Date: 01-31-2006

Issuance

Ticket: 9054708868
 Issued: 04-17-2005 00:53
 Officer ID: 867
 Location: 960 W MONTANA
 Rpt. District: 0502
 Meter:

Vehicle

Plate/State: ANMARIS / IL
 Plate Type: PAS
 Expiration: 06-2005
 Make: CHRY
 Color:
 Alt. Identifier: 1C3EL65U81N640686
 Alt. Identifier Type: VIN
 Corp Nbr/Type: /

Payment

Fines/Penalties/Fees: \$50.00
 Total Pymts/Adj: \$0.00 / \$0.00
 Amount Due: \$50.00

Owner

Ownr/Resp Prty: NAIMOLI
 First/MI: LIBERATO L
 DLN/State: N54053252135 / IL
 Second Owner:
 First/MI:
 DLN/State: /
 Address: 1219 ASHLEY
 City/State: ADDISON / IL
 Zip: 60101-5735
 Lessor:

Control

Queue/Date: Court / 05-04-2005
 Notice Number: 5061333950
 Last Notice Date: 05-04-2005
 Notice Type: Violation
 Notice Date: 04-29-2005
 Next Notice Type: Determination
 Next Notice Date: 05-18-2005
 Contest Queue: Un-Scanned
 Hearing Sched/Disp: 05-02-2005 / 05-31-2005
 Disposition Reason:

Violation

Number	Description	VIOL	FINL
0964090E	RESIDENTIAL PERMIT PARKING	\$50	\$10

SAHRSTABA

Docmnt & DISSEMINATION

Status: INITIAL COLLECT... Orig Meaning: 02/02/2006

Source: A-HHS Status Desc: 02222006 Cont Meaning:

Date: S+S Admin Review: Interest Begin Date: 03/10/2005

Unit: 542 AR Disposition: Interest End Date: 03/10/2008

Case: Bankruptcy Filing: Adjustment Date:

Settlement Amt: Ad Release:

First Name Last Name Business Name Street # Str Dir Street Name

KENNY CONSTR, 250 NORTHGATE PROM

Adjustments:		Fees & Expenses:	
Total Fine:	0.00	Total Fine:	200.00
Admin Fee:	0.00	Admin Fee:	25.00
Sanction Fee:	0.00	Sanction Fee:	0.00
NSF Fee:	0.00	NSF Fee:	
CCC Fee:	0.00	CCC Fee:	
Attorney Fee:	0.00	Attorney Fee:	0.00
Court Cost:	0.00	Court Cost:	0.00
Interest:	0.00	Interest:	0.00

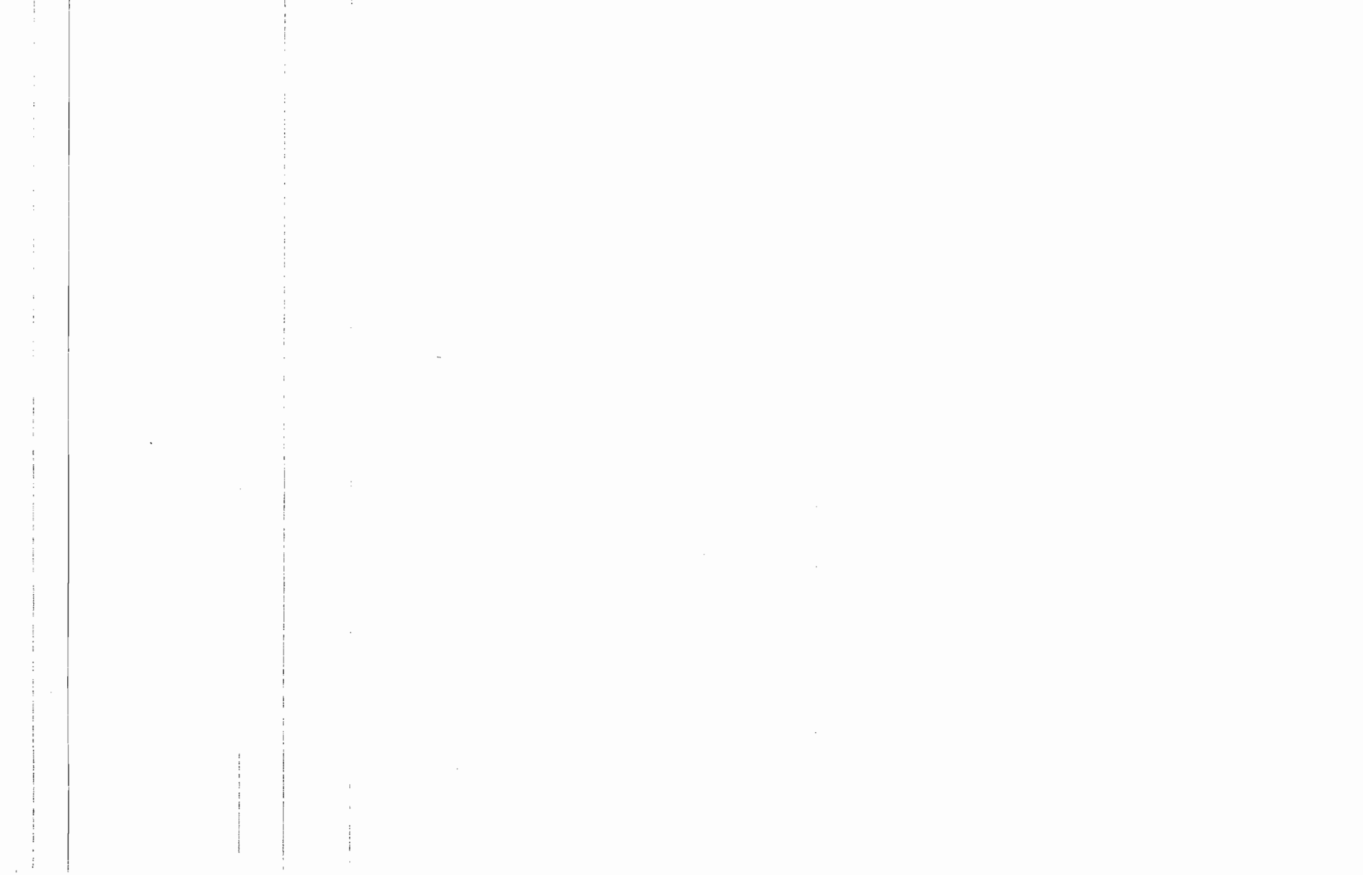
Gross Amount Due:	225.00
Total Amount Paid:	0.00
Current Balance:	225.00

Citation	Count	Municipal Code	Fining	Fine	Final Fine
5000140560 1		19-32-125(C)	VIOLATION		200.00

Violated on Address Information
 Street # 1235
 City CHICAGO
 State IL
 Zip 60611
 Manual Check?

NOV Date: 11/29/2005
 Pymt Plan: Contact Log: Total: 200

Package Detail: Payment Info: Adjustments: Law Firm Status: Contact Log: Holds: Liens: Forms/Notices



Docket #						Status		Orig Hearing		Adj. Amounts		Fines & Fees	
3893001878						NEW DOCKET		03/02/2006		0.00		Total Fines: 200.00	
Source: AFMS						Status Date: 02/18/2006		Cont Hearing:		0.00		Admin Fee: 25.00	
Dept: S-S						Admin Review:		Interest Begin Date: 04/07/2006		0.00		Sanction Fee: 0.00	
Unit: 602						AR Disposition:		Interest End Date: 04/07/2006		0.00		NSF Fee:	
Case:						Bankruptcy Filing:		Adjustment Date:		0.00		CCC Fee:	
Settlement Amt:						Adj Reason:				0.00		Attorney Fee: 0.00	
										0.00		Court Cost: 0.00	
										0.00		Interest: 0.00	
												Gross Amount Due: 225.00	
												Total Amount Paid: 0.00	
												Current Balance: 225.00	

First Name	Last Name	Business Name	Street #	Str. Dir	Street Name
		KENNY CONSTR.	250		NORTHGATE PKWY

Citation	Count	Municipal Code	Finding	Final Fine	
S000142059	1	13-32-126(2)	Construction Site	LIABLEA	200.00

NOV Date: 01/18/2006 Total: 200

Payment Plan: Contact Log:

Violation Address Information

Street # Str. Dir Street Name

1841 S CALLWET

City State Zip

Manually Changed?

Docket Detail | Payments Info | Adjustments | Law Firm Status | Contact Log | Holds/Liens | Forms/Notices

AH Referrals						Fees & Fees																													
Docket #: USDC001924	Status: NEW DOCKET	Orig Hearing: 03/02/2006	Am. Judgment: 0.00	Total Fine: 200.00																															
Source: AHMS	Status Date: 02/18/2006	Cont Hearing:	0.00	Admin Fee: 25.00																															
Dept: S+S	Admin Review:	Interest Begin Date: 04/07/2006	0.00	Sanction Fee: 0.00																															
Unit: 802	AR Disposition:	Interest End Date: 04/07/2006	0.00	NSF Fee:																															
Case:	Bankruptcy Filing:	Adjustment Date:	0.00	CCC Fee:																															
Settlement Amt:	Adj Reason:		0.00	Attorney Fee: 0.00																															
			0.00	Court Cost: 0.00																															
			0.00	Interest: 0.00																															
<table border="1"> <thead> <tr> <th>First Name</th> <th>Last Name</th> <th>Business Name</th> <th>Street #</th> <th>Str. Dir</th> <th>Street Name</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>KENNY CONSTR.</td> <td>250</td> <td></td> <td>NORTHGATE</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						First Name	Last Name	Business Name	Street #	Str. Dir	Street Name			KENNY CONSTR.	250		NORTHGATE							Gross Amount Due: 225.00											
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CITY OF CHICAGO
Department of Planning and Development
PRINCIPAL PROFILE SHEET

Company: Construction & General Laborers District
and Vicinity Joint Training and Apprentices Fund

Form must be filled out COMPLETELY for individuals and entities owning any interest in order for application to be processed.
For TRUSTS or other entities owning an interest in the borrower, please provide complete information on trustee and beneficiary on a separate sheet.

Name:	David Long
Home Address:	
Telephone: ()	773
Social Security Number:	
Date of Birth:	
Driver's License Number:	
License Plate Number:	
Percentage Owned:	

Name:	R. Lynn Treat Treat Robert
Home Address:	
Telephone: ()	847
Social Security Number:	
Date of Birth:	
Driver's License Number:	
License Plate Number:	
Percentage Owned:	HAYFT 2 2644349

Name:	Liberato Naimoli
Home Address:	
Telephone: ()	63
Social Security Number:	
Date of Birth:	
Driver's License Number:	
License Plate Number:	
Percentage Owned:	

Name:	Joseph A. Mann
Home Address:	
Telephone: ()	63
Social Security Number:	
Date of Birth:	
Driver's License Number:	
License Plate Number:	
Percentage Owned:	

CHICAGO DEPARTMENT OF REVENUE
COST RECOVERY & COLLECTION
2006 INDEBTEDNESS INVESTIGATOR
STATEMENT OF LIABILITIES



TO: Danita W Childers Department of Planning & Development
FROM: Chicago Department of Revenue
Indebtedness Investigations

Individual/Business Name: David Lorig
Individual/Business Address: _____
City, State, Zip Code: _____

After a review, the following liabilities have been found:

WATER:
 Acct. No: _____ Amount: \$0.00
 Amount: \$ _____

PARKING:
 Plate No: _____ Amount: \$0.00
 Plate No: _____ Amount: \$ _____
 Plate No: _____ Amount: \$ _____
 Plate No: _____ Amount: \$ _____
 Plate No: _____ Amount: \$ _____
 Plate No: _____ Amount: \$ _____
 Plate No: _____ Amount: \$ _____
 Plate No: _____ Amount: \$ _____
 Total Amount: \$0.00

False Burglar Alarm: _____ Amount: \$0.00
 HOLD NOTICE: # _____ Amount: \$0.00
 Caps: \$0.00

TOTAL AMOUNT: \$0.00

Warrants: \$0.00
 Judgement Collections Admin. Hearings, : \$0.00
 Amount owed Cost Recovery & Collections Unit: \$0.00

INDIVIDUAL/BUSINESS OWNER LIABILITIES: \$0.00

Department of Revenue does not waive the right to audit or review the accounts of the individual/business listed above at a future date. Should you have any question regarding these debts, please contact the numbers listed below:

Parking Debt
(312) 744-7275

Adm. Hearings
(312) 745-1094

Warrants
(312) 747-3790

Edith Stinson
Name of investigator

Edith Stinson
Signature

March 2, 2006 312-744-0801
Date Phone Number

CHICAGO DEPARTMENT OF REVENUE
COST RECOVERY & COLLECTION
2006 INDEBTEDNESS INVESTIGATOR
STATEMENT OF LIABILITIES



TO: Danita W Childers Department of Planning & Development
FROM: Chicago Department of Revenue
Indebtedness Investigations

Individual/Business Name: Robert L Treat

Individual/Business Address: _____

City, State, Zip Code: _____

After a review, the following liabilities have been found:

WATER:

Acct. No: _____ Amount: \$0.00
Amount: \$ _____

PARKING:

Plate No: _____ Amount: \$0.00
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____

Total Amount: \$0.00

False Burglar Alarm: _____ Amount: \$0.00

HOLD NOTICE: # _____ Amount: \$0.00

Caps: \$0.00

TOTAL AMOUNT: \$0.00

Warrants: \$0.00

Judgement Collections Admin. Hearings, : \$0.00

Amount owed Cost Recovery & Collections Unit: \$0.00

INDIVIDUAL/BUSINESS OWNER LIABILITIES: \$0.00

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Adm. Hearings
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Warrants
(312) 747-3790

Edith Stinson
Name of investigator

Edith Stinson
Signature

March 2, 2006 312-744-0801
Date Phone Number

CHICAGO DEPARTMENT OF REVENUE
COST RECOVERY & COLLECTION
2006 INDEBTEDNESS INVESTIGATOR
STATEMENT OF LIABILITIES



TO: Danita W Childers Department of Planning & Development
FROM: Chicago Department of Revenue
Indebtedness Investigations

Individual/Business Name: Joseph A Mann
Individual/Business Address: _____
City, State, Zip Code: _____

After a review, the following liabilities have been found:

WATER:

Acct. No: _____ Amount: \$0.00
Amount: \$ _____

PARKING:

Plate No: _____ Amount: \$0.00
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____

Total Amount: \$0.00

False Burglar Alarm: _____ Amount: \$0.00

HOLD NOTICE: # _____ Amount: \$0.00

Caps: \$0.00

TOTAL AMOUNT: \$0.00

Warrants: \$0.00

Judgement Collections Admin. Hearings, : \$0.00

Amount owed Cost Recovery & Collections Unit: \$0.00

INDIVIDUAL/BUSINESS OWNER LIABILITIES: \$0.00

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(312) 744-7275

Adm. Hearings
(312) 745-1094

Warrants
(312) 747-3790

Edith Stinson
Name of investigator

Edith Stinson
Signature

March 2, 2006
Date

312-744-0801
Phone Number



CITY OF CHICAGO Department of Planning and Development PRINCIPAL PROFILE SHEET

Company: CONSTRUCTION & GENERAL LABORERS DISTRICT COUNCIL
OF CHICAGO & VICINITY JOINT TRAINING & APPRENTICE

Form must be filled out COMPLETELY for individuals and entities owning any interest in order for application to be processed. FUND
FOR TRUSTS or other entities owning an interest in the property, please provide complete information on trustee and beneficiary on a separate sheet.

Name: Gerard M. Kenny	
Home Address:	Northfield,
Telephone: (84	
Social Security N	
Date of Birth:	
Driver's License	
License Plate Nu	
Percentage Owned:	N/A

Name: Robert Madden, Sr.	
Home Address:	
Telephone: (63	
Social Security Nu	
Date of Birth:	
Driver's License N	
License Plate Num	
Percentage Owned:	

Name: Donald Henderson	
Home Address:	
Telephone: (837)	
Social Security Num	
Date of Birth:	
Driver's License Num	
License Plate Number	
Percentage Owned:	

Name: Thomas Nordeen	
Home Address:	
Telephone: (815	
Social Security Num	
Date of Birth:	
Driver's License Nu	
License Plate Num	
Percentage Owned:	

CHICAGO DEPARTMENT OF REVENUE
COST RECOVERY & COLLECTION
2006 INDEBTEDNESS INVESTIGATOR
STATEMENT OF LIABILITIES



TO: Danita W Childers Department of Planning & Development
FROM: Chicago Department of Revenue
Indebtedness Investigations

Individual/Business Name: Robert Madden, Sr
Individual/Business Address: _____
City, State, Zip Code: _____

After a review, the following liabilities have been found:

WATER:

Acct. No: _____ Amount: \$0.00
Amount: \$ _____

PARKING:

Plate No: _____ Amount: \$0.00
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____

Total Amount: \$0.00

False Burglar Alarm: _____ Amount: \$0.00

HOLD NOTICE: # _____ Amount: \$0.00

Caps: \$0.00

TOTAL AMOUNT: \$0.00

Warrants: \$0.00

Judgement Collections Admin. Hearings, : \$0.00

Amount owed Cost Recovery & Collections Unit: \$0.00

INDIVIDUAL/BUSINESS OWNER LIABILITIES: \$0.00

Department of Revenue does not waive the right to audit or review the accounts of the individual/business listed above at a future date. Should you have any question regarding these debts, please contact the numbers listed below:

Parking Debt
(312) 744-7275

Adm. Hearings
(312) 745-1094

Warrants
(312) 747-3790

Edith Stinson
Name of investigator

Edith Stinson
Signature

March 2, 2006 312-744-0801
Date Phone Number

CHICAGO DEPARTMENT OF REVENUE
COST RECOVERY & COLLECTION
2006 INDEBTEDNESS INVESTIGATOR
STATEMENT OF LIABILITIES



TO: Danita W Childers Department of Planning & Development
FROM: Chicago Department of Revenue
Indebtedness Investigations

Individual/Business Name: Donald Henderson

Individual/Business Address: _____

City, State, Zip Code: _____

After a review, the following liabilities have been found:

WATER:

Acct. No: _____ Amount: \$0.00

Amount: \$ _____

PARKING:

Plate No: _____ Amount: \$0.00

Plate No: _____ Amount: \$ _____

Plate No: _____ Amount: \$ _____

Plate No: _____ Amount: \$ _____

Plate No: _____ Amount: \$ _____

Plate No: _____ Amount: \$ _____

Plate No: _____ Amount: \$ _____

Plate No: _____ Amount: \$ _____

Total Amount: \$0.00

False Burglar Alarm: _____ Amount: \$0.00

HOLD NOTICE: # _____ Amount: \$0.00

Caps: \$0.00

TOTAL AMOUNT: \$0.00

Warrants: \$0.00

Judgement Collections Admin. Hearings, : \$0.00

Amount owed Cost Recovery & Collections Unit: \$0.00

INDIVIDUAL/BUSINESS OWNER LIABILITIES: \$0.00

Department of Revenue does not waive the right to audit or review the accounts of the individual/business listed above at a future date. Should you have any question regarding these debts, please contact the numbers listed below:

Parking Debt
(312) 744-7275

Adm. Hearings
(312) 745-1094

Warrants
(312) 747-3790

Edith Stinson
Name of investigator

Edith Stinson
Signature

March 7, 2006 312-744-0801
Date Phone Number

CHICAGO DEPARTMENT OF REVENUE
COST RECOVERY & COLLECTION
2006 INDEBTEDNESS INVESTIGATOR
STATEMENT OF LIABILITIES



TO: Danita W Childers Department of Planning & Development
FROM: Chicago Department of Revenue
Indebtedness Investigations

Individual/Business Name: Thomas Nordeen
Individual/Business Address: _____
City, State, Zip Code: _____

After a review, the following liabilities have been found:

WATER:
Acct. No: _____ Amount: \$0.00
Amount: \$ _____
PARKING:
Plate No: _____ Amount: \$0.00
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Total Amount: \$0.00

False Burglar Alarm: _____ Amount: \$0.00
HOLD NOTICE: # _____ Amount: \$0.00
Caps: \$0.00
TOTAL AMOUNT: \$0.00

Warrants: \$0.00
Judgement Collections Admin. Hearings, : \$0.00
Amount owed Cost Recovery & Collections Unit: \$0.00

INDIVIDUAL/BUSINESS OWNER LIABILITIES: \$0.00

Department of Revenue does not waive the right to audit or review the accounts of the individual/business listed above at a future date. Should you have any question regarding these debts, please contact the numbers listed below:

Parking Debt
(312) 744-7275

Adm. Hearings
(312) 745-1094

Warrants
(312) 747-3790

Edith Stinson
Name of investigator
Edith Stinson
Signature

March 2, 3006 312-744-0801
Date Phone Number



CITY OF CHICAGO
Department of Planning and Development
PRINCIPAL PROFILE SHEET

Company: CONSTRUCTION & GENERAL LABORERS DISTRICT COUNCIL
OF CHICAGO & VICINITY JOINT TRAINING AND APPRENTICE FUND

Form must be filled out **COMPLETELY** for individuals and entities owning any interest in order for application to be processed. FUND
For TRUSTS or other entities owning an interest in the business, please provide complete information on trustee and beneficiary on a separate sheet.

Name: Martin Flanagan
 Home Address:
 Telephone: (70)
 Social Security Num
 Date of Birth:
 Driver's License N
 License Plate Num
 Percentage Owned:

Name: J. Michael Lazzaretto
 Home Address:
 Telephone: (630) 78
 Social Security Number
 Date of Birth:
 Driver's License Number
 License Plate Number
 Percentage Owned:

Name: JAMES P. CONNOLLY
 Home Address:
 Telephone: (708)
 Social Security Numb
 Date of Birth:
 Driver's License Num
 License Plate Number
 Percentage Owned:

Name: Frank Riley
 Home Address:
 Telephone: (8)
 Social Security N
 Date of Birth:
 Driver's License
 License Plate Nu
 Percentage Owned:

CHICAGO DEPARTMENT OF REVENUE
COST RECOVERY & COLLECTION
2006 INDEBTEDNESS INVESTIGATOR
STATEMENT OF LIABILITIES



TO: Danita W Childers Department of Planning & Development
FROM: Chicago Department of Revenue
Indebtedness Investigations

Individual/Business Name: Martin Flanagan
Individual/Business Address: _____
City, State, Zip Code: _____
After a review, the following liabilities have been found:

WATER:
Acct. No: _____ Amount: \$0.00
Amount: \$ _____

PARKING:
Plate No: _____ Amount: \$0.00
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Total Amount: \$0.00

False Burglar Alarm: _____ Amount: \$0.00
HOLD NOTICE: # _____ Amount: \$0.00
Caps: \$0.00

TOTAL AMOUNT: \$0.00

Warrants: \$0.00
Judgement Collections Admin. Hearings, : \$0.00
Amount owed Cost Recovery & Collections Unit: \$0.00

INDIVIDUAL/BUSINESS OWNER LIABILITIES: \$0.00

Department of Revenue does not waive the right to audit or review the accounts of the individual/business listed above at a future date. Should you have any question regarding these debts, please contact the numbers listed below:

Parking Debt
(312) 744-7275

Adm. Hearings
(312) 745-1094

Warrants
(312) 747-3790

Edith Scinson
Name of investigator

Edith Scinson
Signature

March 2, 2006 312-744-0801
Date Phone Number

CHICAGO DEPARTMENT OF REVENUE
COST RECOVERY & COLLECTION
2006 INDEBTEDNESS INVESTIGATOR
STATEMENT OF LIABILITIES



TO: Danita W Childers Department of Planning & Development

FROM: Chicago Department of Revenue
Indebtedness Investigations

Individual/Business Name: John M Lazzaretto

Individual/Business Address: _____

City, State, Zip Code: _____

After a review, the following liabilities have been found:

WATER:

Acct. No: _____ Amount: \$0.00
Amount: \$ _____

PARKING:

Plate No: _____ Amount: \$0.00
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Total Amount: \$0.00

False Burglar Alarm: _____ Amount: \$0.00

HOLD NOTICE: # _____ Amount: \$0.00

Caps: \$0.00

TOTAL AMOUNT: \$0.00

Warrants: \$0.00

Judgement Collections Admin. Hearings, : \$0.00

Amount owed Cost Recovery & Collections Unit: \$0.00

INDIVIDUAL/BUSINESS OWNER LIABILITIES: \$0.00

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Parking Debt
(312) 744-7275

Adm. Hearings
(312) 745-1094

Warrants
(312) 747-3790

Edith Stinson
Name of investigator

Edith Stinson
Signature

March 2, 3006 312-744-0801
Date Phone Number

CHICAGO DEPARTMENT OF REVENUE
COST RECOVERY & COLLECTION
2006 INDEBTEDNESS INVESTIGATOR
STATEMENT OF LIABILITIES



TO: Danita W Childers Department of Planning & Development
FROM: Chicago Department of Revenue
Indebtedness Investigations

Individual/Business Name: James P Connolly
Individual/Business Address: _____
City, State, Zip Code: _____

After a review, the following liabilities have been found:

WATER:

Acct. No: _____ Amount: \$0.00
Amount: \$ _____

PARKING:

Plate No: _____ Amount: \$0.00
Plate No: _____ Amount: \$
Plate No: _____ Amount: \$
Plate No: _____ Amount: \$
Plate No: _____ Amount: \$
Plate No: _____ Amount: \$
Plate No: _____ Amount: \$
Plate No: _____ Amount: \$
Total Amount: \$0.00

False Burglar Alarm: _____ Amount: \$0.00

HOLD NOTICE: # _____ Amount: \$0.00

Caps: \$0.00

TOTAL AMOUNT: \$0.00

Warrants: \$0.00

Judgement Collections Admin. Hearings, : \$0.00

Amount owed Cost Recovery & Collections Unit: \$0.00

INDIVIDUAL/BUSINESS OWNER LIABILITIES: \$0.00

Department of Revenue does not waive the right to audit or review the accounts of the individual/business listed above at a future date. Should you have any question regarding these debts, please contact the numbers listed below:

Parking Debt
(312) 744-7275

Adm. Hearings
(312) 745-1094

Warrants
(312) 747-3790

Edith Stinson
Name of investigator

Edith Stinson
Signature

March 2, 3006 312-744-0801
Date Phone Number

CHICAGO DEPARTMENT OF REVENUE
COST RECOVERY & COLLECTION
2006 INDEBTEDNESS INVESTIGATOR
STATEMENT OF LIABILITIES



TO: Danita W Childers Department of Planning & Development
FROM: Chicago Department of Revenue
Indebtedness Investigations

Individual/Business Name: Frank Riley
Individual/Business Address: _____
City, State, Zip Code: _____

After a review, the following liabilities have been found:

WATER:

Acct. No: _____ Amount: \$0.00
Amount: \$ _____

PARKING:

Plate No: _____ Amount: \$0.00
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____
Plate No: _____ Amount: \$ _____

Total Amount: \$0.00

False Burglar Alarm: _____ Amount: \$0.00

HOLD NOTICE: # _____ Amount: \$0.00

Caps: \$0.00

TOTAL AMOUNT: \$0.00

Warrants: \$0.00

Judgement Collections Admin. Hearings, : \$0.00

Amount owed Cost Recovery & Collections Unit: \$0.00

INDIVIDUAL/BUSINESS OWNER LIABILITIES: \$0.00

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