

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

CITY OF CHICAGO 2014 STATEMENT OF FINANCIAL INTERE

To avoid a legal violation and sanction, including a \$250 fine and having your name and water than June 2. 2014 to: Board of Ethics 740 N. Sedgwick, Ste. 500 Chicago, IL

being made public, you must return this form no later than June 2, 2014 to:

- Please print out this form on legal-sized paper, complete it, sign it and then mail / deliver it to the Board of Ethics . We can Statements via e-mail, fax or PDF formats. 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 categ B= \$5,000 - \$24,999 C= less than \$5,000 A= \$25,000 or more NOTE: for public safety reasons, filers in the Chicago Fire and Police Departments, Independent Police Review Authority and Office of Emergency Communications or who are building 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, etc.

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ddress:						c	ity: Chic	ayo Stat	e: <u>IL</u> Zip: 60	•
ity Depar	tment/Agency:	Cang.	deto	Chy	of Cl	ico de	= Alde	Mau	50 th w	ard
In 2013,	, were you employe	d by any gover	nmental un	it other than 1	the City of	Chicago?			Yes	₽No
	st the name of vernmental unit									
r, any pro ,000.00?	were you an emplofessional, business	or organization	n other tha	n the City fro	m which y	ou received o	or derived inco	ome of more	tapacity than Yes	□ 466
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me _			Nature of Service			Governmen Which Perso	t Unit With on Did Business		+ Amount of Inco	ome,
a nersor	* or entity doing b	usiness* with the	he City of Ch	nicago, the Ch	icago Trar	sit Authority	, Board of Edu	cation (inclu	ness or other services ding the Chicago Sch	ool
		9] I had no s				- 1	Yes	T-140
If YES,	, provide the follow	ing for each pe	rson to whic	:h Spouse/ Do	omestic Pa	rtner provide	ed services:			
me			Nature of Services			Governmen Which Perso	t Unit With on Did Business		+ Amount of Inco	ome,
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Г	, provide the rollow	ing information	1 about the	endty in write		e of Person to	_	o maneta v		
ime					Servi	ces were pro	vided			
ature of ervices				vernment Unit Ich Person Did					+ Amount of Income, By Category	
re owne	ed prior to Novemb companies need no	er 1, 2012, time ot be disclosed.	e or demand but stock w	d deposits in f orth \$15,000	inancial in or more of	a publi cly he	endowments eld corporatio	, policies or a n which stoci	icly held corporation nnuities purchased fr cyou acquired on or	om after
ovember	1, 2012, must be d ES, provide the follo	isclosed if the c	orporation i	s doing busir	ness with t	ne City.) "		***************************************	☐ Yes	Ŋ No
ame							or Description Held in This Pe			

If YES		-	ration is con	ducting business in the C	ty.)		Yes	
9.2	S, provide the follo	owing for each person:						
ame					/ Instrument of ership			
		a capital gain of \$5,000.00 or						
		a) I d (to also disposale a address					☐ Yes	[□-No
		s) sold (including the address ed asset (see note at top of fo		escription of the real estate	e) and the appropr	late Category	or the amou	it or gairi
				(1)		+ Amount	t of gain , By	
Do voi	have a financial i	interest* in real estate locate	d in the City	of Chicago, other than vo	our principal place	of residence?	Include all fo	orms of
ect or l	ndirect ownership	o, such as partnerships or tru	sts whose c	orpus consists primarlly o	f real estate. (If yo	ur principal pla		
		e building in which you have			-		Yes	E NO
	S, identify the real description:	estate by address (see note	at top of for	rm for filers from certain d	epartments), Inclu	ding zip code,	or, if there is	no addres
gregate	e value in excess o	e from any person* (other that of \$250,00?				naving an	Yes	<u>□</u> №
If YES	S, identify the pers	son or persons from whom y	ou received	such gifts:				
		e an improper gift* that you o ance?					Yes	ID No
		roper gift(s), the donor(s) if k						
			_					
			e financial i	nterest and describe the C	ity action request			the
pplicat		e person(s) in which you hav e action requested):	e financial i	nterest and describe the C	Action			the
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