Albertan for 30th ward

A=\$25,000 or more

CITY OF CHICAGO 2018 STATEMENT OF FINANCIAL INTERESTS

Sedgwick, Ste. 500
Chicago, IL 50654-8488
(312) 744-9660

Please complete this form, sign it and then mail / deliver it to the Board of Ethics. We cannot accept Statements via e-mail, fax or PDE OCT 2 4 2018 formats. Please answer all 16 questions and sign and date your form before returning it. If you need more room, please attach and label extra sheets. Terms with an asteriski[®] are defined on the instruction sheet. + In questions 2-5 & 3, indicate the appropriate income, compensation or capital gain by writing in the appropriate

and Offi	ce of Emergency Communi	cations and build	ing and health inspe	ents, Inspector General's Offi ectors need not disclose the a <u>umber</u> and <u>types</u> of propertie	ddress of business(es	s), organizations or
Last Name:	Guzman	First Name	EIVIS	Middle Ini	tial:	
Mailing Addre	ess:		ļ,	City: Chica	190 State: 1	Zip: 606
City Departm or Commissio			,	Title:		
1. In 2017, we	ere you employed by any go	overnmental unit o	ther than the City of	Chicago?		Yes X No
	he name of inmental unit					
professional, b derived incom	ousiness or other organizati	on (other than yo	ur City employmen	proprietor or in any advisory of tor appointment) from which	h you received or	☐ Yes ✓ No
Name & Address:		Туре		Your Position		nount of Income, ategory
ousiness* with Metropolitan I	n the City of Chicago, the Ch Pier and Exposition Authori ovide the following for each	nicago Transit Auth	nority, Chicago Board		+ Am	Yes No
vork or other iducation, Chi	services rendered to a perso icago Park District, Chicago	on* or entity doing City Colleges, or N	business* with the (letropolitan Pier and	yment in excess of \$5,000.00 i City of Chicago, the Chicago T Exposition Authority? Id no spouse or domestic part mestic Partner provided servic Government Unit With Which Person or Entity Did 3 usiness	ransit Authority, Chio	ago Board of Yes No
or professiona Thicago Board	al*, business or other service I of Education, Chicago Park	OR your spouse or es rendered to any c District, Chicago	person* or entity do City Colleges, or Metr	have a financial interest* rece sing business* with the City of ropolitan Pier and Exposition use/domestic partner have a li	ive compensation in Chicago, the Chicag Authority?	excess of \$5,000.00 o Transit Authority, Yes No
Name				of Person or Entity to which es were provided		
Nature of Services			ment Unit With Person Did Business		+ Amount By Catego	of Income.
epresent less	you have a financial interest than 1/2 of 1% (.05%) of the suities purchased from insur	company's outsta	inding common stoc	the City? (Note: common sto k, or time or demand deposi d.)	ts in financial institut	cly held companies that lions, or endowments,
If YES, p	provide the following for ea	ch person:		Title or Description of You Held in This Perso	Position	

companies that represent le	nancial interest* in any person* conductions in the compartion of 1% (,05%) of the compartions, policies or annuities purchased from	ny's outstanding common s	tock, or time or de	mand deposits in financial	ANO
If YES, provide the follow	wing for each person			*	To France
Name		Type / Owner	Instrument of ship		
8. In 2017, did you realize a dresidence?	capital gain of \$5,000.00 or more from	the sale of any capital asset	other than your p	incipal place of	▼ No
If YES, identify the asset(s)	sold including the address or legal de d,asset isee note at too of form)				of gain
				+ Amount of gain . By Category	
forms of direct or indirect ow residence is in a multiple-uni	inancial interest* in real estate located rnership, such as partnerships or trusts t or mixed-use building in which you h	whose corpus consists prin have a financial interest*, an	narily of real estate swer "yes" to this o	. (If your principal place of juestion.) Yes	No
If YES, identify the real a legal description:	istate by address, see note at too of for	rm for filers from certain dei	oartments). includi	ng zip code or, if there is n	o address, by
aggregate value in excess of	from any person* (other than relatives* \$250.00? In or persons from whom you received			ving an Yes -	₹ No
Governmental Ethics Ordinar	any improper gift* that you disposed o nce? oper gift, si, the donor st if known, and		n 2-156-144 of the	Yes	No No
or franchise, or any permit fo	financial interest* in any person* or en r annexation, zoning or rezoning of rea person, s) in which you have the financ action requested):	al estate?		Yes	of the
Name			Action Requested		
or the City of Chicago in 201 oans of the kind you receive	L	nts issued by financial instit conditions standard for sucl	utions whose norm loans at the time dicorporations and	nal business includes the r the debt was contracted, i I purchased by you on the	making of f the
Name of Debtor, Creditor or Guarantor		Is the Person a Debtor, Creditor or Guarantor		Type of Debt Instrument	
	ard or commission either as a volunteer or (5) of board(s) and your position(s) on		-City boards or comm	nissions)? Yes	No No
5. Do you currently have a	relative* or domestic partner* who is r	egistered as a lobbyist with	the City's Board o	f Ethics? Yes	√ No.
If /ES name the lobbyis	tis) and the lobbyist's relationship to yo	ou			
Name(s)			Relationship	na. de la constante de la cons	
	elative* or domestic partner* who is an or domestic partner(s), his/her/their re				No the
contractor(s): Name(s)/ relationship(s)	Contracto			ition(s)	
and belief it is true and com	nat I have examined this Statement of Finan polete. I understand that knowingly filing a n office, or employment sanctions, includin	Statement containing false or	misleading informat	ion, or failing to file by the de	adline, can