

Name

CITY OF CHICAGO 2022 STATEMENT OF FINANCIAL INTERESTS

To avoid a violation of the Governmental Etrics Ordina country suctions, 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 cose of business Monday, May 2, 2022 to: Board of Ethics, 740 N. Sedgwidt Soft 50 hicago, IL 60654-8488

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 or fax. 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 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. Draper Cleopatra Last Name: First Name: Middle Initial: Chicago State: IL. 606 Address: City: Zip Code: Alderperson 9th Ward City Department/Agency: Candidate Title: 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 Yes X No If YES, for each organization provide the following information: (see note above) Name & Type of Your +Amount of Income 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, pravide the following for each person to which you provided servi 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 X No If YES, provide the following for each person n to which Spouse/ Domestic Partner provided services. Nature of Governmental Unit with +Amount of Income Name Service Which Person Did Business By Category 5 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? 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 6. 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 purchased from insurance companies, need not be disclosed.) Yes X No If YES; provide the following for each person:

Title or Description of Position

Your held in This Person

that repres	sent less tha	ın ½ of 1% (.	nterest* in ar 5%) of the co ance compar	ompany's (outstandir	ng business* ng stock, or d sclosed)	emand d	eposits in	e: stock financia	interests Il instituti	ons <u>, or</u> e	ndow	ld corpora ments, po No	olicie
If YES, provid	de the follow	ng for each p	HSOn:					_						
Name							nstrumer nership	nt						
In 2021, did	d you realiz	e a capital o	gain of \$5,00	0.00 ог п	ore from	the sale of a	ıny capit	al asset	other tha	an your p	orincipal	place Yes	of reside	ence'
If YES, identi	ify the asset(:	s) sold (includ	ing the addres	s or legal d	lescription :	of the real esta	te) and th	e appropri	ate Categ	gory of the	amount	of gair	n realized I	for ea
	eribee hete	ar lop or form										nount Categ	of Income ory	
residence is	ect or indire s in a multip	ect ownershi le-unit or miz	terest* in rea p, such as p ked-use build	artnership Jing in whi	os or trust ich vou ha	ts whose cor ave a financia	pus cons Il interesi	sists prim t*. answe	arily of r	eal estat	te. (If you	ur pri	ncipal pla	ace o
If YES, ider legal descri	ntify the real	estate by ac	ldress (see no	ote at top o	of form for	filers from ce	rtain dep	artments),	includin	g zip coo	le, or, if t	here i	s no addr	ess,
In 2021, die of \$250.00	d you receiv	e from any	person* (othe	er than rel	atives* or	a domestic p	eartner*)	one or m	ore gifts	having a	n aggreç	gate v Yes	alue in e	xces
II YES, iden	ntify the pers	on or person	s from whom	уои гесен	ed such g	ifts								
			oer gifts* that											ance:
			he donor(s) if								" LJ`	r'es	IXI No	
						a diopose o	Justina	a mina ar	umanue					
If YES, list t	tion, zoning	or rezoning the person(s,	nterest* in ar of real estate in which you	e?			***************************************	•••••			🔲)	res	X No	
Name						Action Req	uested							
making of le contracted,	of Chicago oans of the if the loans	o in 2021? (kind receive are made a	es you more Do not included by you in t the prevailing	de: (1) de accordanc no rate of	ebt instrur ce with ot interest:	nents issued her terms an or (2) debt in	by finan d conditi strument	ncial instit ons stand is issued	tutions water dard for by public	vhose no such loa cly beld (omal but ns at the	sines time	s include the debi	s the
					□ Ine	either owe no	r am owe	ed more t	han \$5,0	00.00			X No	
Name of D	Debtor,	wing informat	ion:			s the Person	a Debtor,	ſ.		Type of	Debt			
	r Guarantor					Creditor or Gu				Instrum	ent			
			commission				mission,	or not for	compe	nsation)?	' Y	es	X No	
FES, provi	ide the ryam	a(s) Orbgard	(s) and your p	position(s)	on the box	ard(s):								
Do you <u>cum</u> County Cler	ently have a	a covered re her unit of k	ative* who is cal governm	registere	d as a lob State of I	byist with the	City's Bo	oard of E	thics, the	e lillinois S			tate, the	Cool
f YES, name	e the lobbyis	t(s) and the	obbyist's rela	tionship to	you	1								
Name(s)						Relationship								
			estic partner*											
YES, name to Name(s) of		or domestic j	partner(s), his/	her/their re			contracto	r(s), and h			n with the	contr	actor(s):	
Relationshi	ipsdeclare that I	have examin	ed this Statem	ent of Fina	Contracto	sts. including	any accon	npanying o	locument	s, and to	the best of	of my	knowledge	e and
it is true and	i complete.	l understand	that knowinglens, including d	y filing a S	tatement c	containing false	or mistea	adina infor	mation o	r failina ta	afile by d	leadlin	e can rec	ult in
	(X10	Herr	W /	Signatur	e and pate	N		ug	ust	d	4	WO	d