

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

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If YES, provide the following for each person:

Name

CITY OF CHICAGO

2022 STATEMENT OF FINANCIAL INTERESTS

To avoid a violation of the Governmental Effics 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, 740 N. Sedgwick, Suite 500, Chicago, IL 60654-8488 By Recei

	<ul> <li>Please complete this form, sign it and then mail / deliver it to the Board of Ethics. We cannot accept Statements via e-mail or it deliver it to the Board of Ethics. We cannot accept Statements via e-mail or it deliver it to the Board of Ethics.</li> </ul>	rer .							
	- 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 Accountabili Office of Emergency Communications, or who are building, consumer protection or health inspectors need not disclose the address of business(e 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-fam	s),							
	house, 2 6-flats."								
	Last Name: LOVIE First Name: BERNARD Middle Initial: D								
	Address: City: CH90 State: I Zip Code: 60	6							
	City: O' 10 State. 41 Zip Code. 60								
	City Department/Agency: Police District Council Title:	-							
	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, busi	iness							
	or organization (other than your City employment or appointment) from which you received or derived income of more than \$1,000.00?								
	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 d	loing							
	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 for each person to which you provided services:								
	Name								
4.	In 2021, did your spouse or domestic partner* receive compensation in excess of \$5,000.00 for professional*, business or other services rendered								
	person* or entity doing business* with the City of Chicago, the Chicago Transil Authority, Chicago Board of Education, Chicago Park District, Chi City Colleges, or Metropolitan Pier and Exposition Authority?	icago							
	If YES, provide the following for each person to which Spouse/ Domestic Partner provided services:								
	Name Service Governmental Unit with +Amount of Income 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								
	\$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 You								
	Name Name Name								
	Services were provided	_							
	Nature of Service Governmental Unit with +Amount of Income 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 repre	sent							
	less than ½ of 1% (.5%) of the company's outstanding stock, or demand deposits in financial institutions, or endowments, policies or appurchased from insurance companies, need not be disclosed.) Yes	uities							

Title or Description of Position Your held in This Person

7.	In 2021, did you have a financial interest* in any person* or that represent less than ½ of 1% (.5%) of the company's out or annuitles purchased from insurance companies, need no	standino sto	ck, or demand de	posits in financia	al Institutions, o	blicly held corporation rendowments, policion Yes No	
	If YES, provide the following for each person:						
	Name		Type/Instrument of Ownership				
3,	. In 2021, did you realize a capital gain of \$5,000.00 or mor	e from the s	ale of any capita	asset other that	an your princip	al place of regidence	
	If YES, identify the asset(s) solo (including the address or legal described asset (see note at top of form).					_	
	Administration of the of the of the office o					Amount of Income By Category	
	Do you <u>currently</u> have a financial interest* in real estate located in the City of Chicago, other than your principal place of residence? Include all forms of direct or indirect ownership, such as partnerships or trusts whose corpus consists primarily of real estate. (If your principal place of residence is in a multiple-unit or mixed-use building in which you have a financial interest*, answer "yes" to this question.)  Yes  No						
	If YES, identify the rest estate by address (see note at top of follogal description:	om for filers	from certain depa	rtments), includin	g zip code, or,	if there is no address,	
).	). In 2021, did you receive from any person* (other than relative of \$250.00?	es* or a dor	nestic partner*) o	ne or more gifts	having an agg	regate value in exces	
	If YES, identify the person or persons from whom you received	such gifts				,	
	. In 2021, did you receive any improper gifts* that you dispose						
	If YES, identify the improper gift(s), the donor(s) if known, and n	nethod of dis	posel as specified	in the ordinance		#	
	Do you <u>currently</u> have a financial interest* In any person* who in 2021 applied to the City of Chicago for a license or franchise, or any perm for annexation, zoning or rezoning of real estate? Yes						
	If YES, list the name of the person(s) in which you have financia sought or the action requested):	al interest and	d describe the City	action requested	d (including the	nature of the applicati	
	Name	Acti	on Requested				
The second	If you <u>currently</u> owe or anyone owes you more than \$5,000.00, did the debtor, creditor or guarantor of the debt do business* with or do work for the City of Chicago in 2021? (Do not include: (1) debt instruments issued by financial institutions whose normal business includes the making of loans of the kind received by you in accordance with other terms and conditions standard for such loans at the time the debt was contracted, if the loans are made at the prevailing rate of interest; or (2) debt instruments issued by publicly held corporations and purchased by you on the open market at the price available to the public.)  I neither owe nor am owed more than \$5,000.00  Yes						
	If YES, provide the following information,		200000000000000000000000000000000000000	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1 23; 1 (1.09)	
	Name of Debtor, Creditor or Guarantor		Person a Deblor, or or Guarantor		Type of Debt Instrument		
	Do you now serve on any board or commission (even if not a	(-		r not for comper	V: 30	Yes O No	
	If YES, provide the Name(s) of board(s) and your position(s) on	the board(s):					
	Do you <u>currently</u> have a covered relative* who is registered as a lobbyist with the City's Board of Ethics, the Illinois Secretary of State, the Cool County Clerk, or any other unit of local government in the State of Illinois?						
	YES, name the lobbyist(s) and the lobbyist's relationship to you:						
	Name(s)		tionship	-			
	Do you now have any relative* or domestic partner* who is an em						
rf	If YES, name the relative(s) or domestic partner(s), his/her/their relation  Name(s) of Relationships  Co	onship to you, ontractor(s)	the city contractor		ition	the contractor(s);	
3	IFICATION: I declare that I have examined this Statement of Financia of it is true and complete. I understand that knowingly filing a State	ment contain	no false or misleed	ing information of	falling to file by	deadline contemult in	
0	oval from office or in employment sanctions, including discharge, in ac	cordance with	applicable rules, re	gulations and ord $8-26$	inances of the C	ity of Chicago.	
Ī	S	ignature and	Date		-		