City of Chicago Board of Emission

2022 STATEMENT OF FINANCIAL INTERESTS- 7 2022

740 N. Sedgwick, Ste. 500 Chicago, IL 60654-8488

To avoid a violation of the Governmental Ethics Ordinance and sanctions, including a \$250 per day fi until you file and having your name and violation being made public, you must return the Gath later than the close of business Monday, May 2, 2022 to: Board of Ethics, 740 N. Sedglytck, Suite 500

(312) 744-9660 Chicago, IL 60654-8488

- 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. 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 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,

			need not disclose the address of business(es), pes of properties owned, e.g.: "1 single-family
Last Name: Hud	son	First Name: Linda	Middle Initial:
Address:		city: Chicago	State: IL Zip Code: 606
City Department/Agency:		Title:	
In 2021, were you employed by a	any governmental unit other tha	n the City of Chicago?	Yes 🖒 No
If YES, list the name of each gove	rnmental unit:		
or organization (other than you	r City employment or appointr	ociate, partner, proprietor or in any adv nent) from which you received or deriv	
Name & Address	e the following information: (see a Type of Organization	Your	+Amount of Income By Category
ousiness* with the City of Chica	ago, the Chicago Transit Autho		ervices rendered to a person* or entity doin cago Park District, Chicago City Colleges, o Yes X No
f YES, provide the following for ea	ch person to which you provided s	Governmental Unit with	+Amount of Income
Name	Service	Which Person Did Busines	
person* or entity doing business	* with the City of Chicago, the C		onal*, business or other services rendered to ard of Education, Chicago Park District, Chicag tner in 2021 Yes No
If YES, provide the following for		comestic Partner provided services;	
Name	Nature of Service	Governmental Unit with Which Person Did Busin	
55,000.00 for professional*, bu Fransit Authority, Chicago Boa	siness or other services rende ard of Education, Chicago Pa	red to any person* or entity doing bus	nterest* receive compensation in excess iness* with the City of Chicago, the Chicago Metropolitan Pier and Exposition Authority Yes No
f YES, provide the following info	rmation about the entity in which	you/spouse/domestic partner have a fir	nancial interest:
Name		Name of Person to which Services were provided	
Nature of Service	II -	overnmental Unit with hich Person Did Business	+Amount of Income By Category
less than 1/2 of 1% (.5%) of the	he company's outstanding sto		sts in publicly held corporations that represer titutions, or endowments, policies or annuitie
If YES, provide the following for e	each person:		
Name		Title or Description of Position	

Your held in This Person

7.	that repre	esent less than	a financial interest* i 1½ of 1% (.5%) of the from insurance cor	ne company's ou	itstanding sto	ck, or demand de	eposits in financ	k interests in ial institution	publicly he s, or endow Yes	ménts, policies
	If YES, prov	vide the followin	g for each person:			Type/Instrumen	t			
3.	L In 2021, d	lid you realize	a capital gain of \$	65,000.00 or mo	re from the s	of Ownership	al asset other t	han your pri	ncipal place	of residence?
	If YES, iden	ntify the asset(s)	sold (including the act top of form).	ddress or legal de	scription of the	real estate) and the	e appropriate Ca		mount of gair	•
			financial interest* in							nce? Include all
r	residence	is in a multiple	ct ownership, such e-unit or mixed-use	building in whic	h you have a	financial interest	*, answer "yes	to this ques	tion.)	KNo
	legal desc		estate by address (s	ee note at top of	form for filers	тот сетат верг	artments), includ	aing zip code,	or, ir there	s no address, b
10.	of \$250.0	00?	e from any person*			VENEZULU VIZ TE (10000EN 1000			aggregate Yes	
	If YES, ide	entify the perso	n or persons from w	hom you receive	d such gifts:					
11,	In 2021, o	did you receive	any improper gifts	* that you dispo	sed of in acco	rdance with Sect	ion 2-156-144	of the Govern	nmental Eth	ics Ordinance?
	If YES, ide	enlify the impro	per gift(s), the donor	r(s) if known, and	d method of di	sposal as specifie	d in the ordinan	ce		
12.	for annex	ation, zoning	a financial interest* or rezoning of real e	estate?					Yes	∑ No
			he person(s) in whic lested):			nd describe the Crition Requested	ty action reques	sted (including	the nature	of the applicatio
3.	If you <u>cur</u> for the C making o contracte	ity of Chicago of loans of the ed, if the loans	anyone owes you r in 2021? (Do not kind received by you are made at the pr rket at the price ava	include: (1) del ou in accordanc evailing rate of	00.00, did the ot instruments e with other tinterest; or (2 blic.)	debtor, creditor s issued by finar terms and conditi) debt instrumen	ncial institution ions standard t ts issued by pu	s whose non for such loan ablicly held co	mal busines s at the tim orporations	ss includes the e the debt was and purchased
		ovide the follow	ving information:		Is the	Person a Debtor		Type of L	Debt	
4	Creditor	or Guarantor	ny board or commis	enion (oven if n		tor or Guarantor	or not for com	Instrume	nt Vos	₩.No
4.			e(s) of board(s) and				or not for com	pensauony:		
5.			covered relative* v						ecretary of	State, the Cook
	If YES, na		tl(s) and the labbyist	's relationship to		lationship				
6.	Do you no	ow have any rela	ative* or domestic pa	artner* who is an	employee or f	ull- or part-owner	of a City contra	ctor?	Yes	∭ No
	<i>If YES, nam</i> Name(s) Relation) of	or domestic partner(s	s), his/her/their re	lationship to yn Contractor(s)	1.		Position	with the con	itractor(s):
elie	IFICATION: of it is true a	I declare that I	have examined this \$ I understand that knownent sanctions, inclu	owingly filing a S	tatement conta	ining false or misle	ading information	n or failing to	file by dead	line, can result ir
_	$ \wedge $	inda-	Hulson		12/5/	/2023	2			
	1/)	()		Signature an	nd Date				