

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

- Terms with an asteriski*) are defined on the instruction sheet.

CITY OF CHICAGO 2018 STATEMENT OF FINANCIAL INTERESTS

To avoid a violation of the Governmental Ethics Ordinance and sanctions, including times and your name and violation peing made public, you must return this form, completed and sometimes shan the close of business Thursday, May 31, 2018 to:

60654.288

- Please complete this form, sign it and then mail / deliver it to the Board of Ethics . We cannot accept Statement 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.

+ In questions 2-5 & 8, indicate the appropriate income, compensation or capital gain by A=\$25,000 or more

NOTE: for security reasons, filers in the Chicago Fire and Police Departments, Inspector General's Office, Civilian Office and Office of Emergency Communications and building and health inspectors need not disclose the address of business(es).

It 2017, were you employed by any governmental unit other than the City of Chicago?	your Partner Position Chicago Park Discover	pacity for any you received are dered to a pestirict, Chicago	y dor Yes Yes - Amount of Incor By Category erson* or entity do City Colleges, or Yes - Amount of Incor By Category	iong No No No No No No No No No N
In 2017, were you employed by any governmental unit other than the City of Chicago?	your Partner Position ther services rechicago Park District With White Tid Business s of \$5,000,00 for the Chicago Tra	pacity for any you received are dered to a pestirict, Chicago	y dor Yes - Amount of Incor By Category erson* or entity de o City Colleges, or Yes - Amount of Incor By Category	No N
US Department of Transportation and governmental unit US Department of Transportation (in 2017, did you serve as an employee, officer, director, associate, partner, or proprietor or in offessional, business or other organization (other than your City employment or appointmentived income of more than \$1,000.00? If YES, for each organization provide the following information: issee note above: Creekside Communities, 4893 Rochester Road, suite D. Troy MI Organization: Manufactured Home Community Owner/ Operator: In 2017, did you receive compensation in excess of \$5,000.00 for professional", business or of siness* with the City of Chicago, the Chicago Transit Authority, Chicago Board of Education, Chropolitan Pier and Exposition Authority? If YES, provide the following for each person or entity to which you provided services. Nature of Service Nature of Service Government on Services with the City of Chicago, the Chicago Transit Authority, Chicago Board or payment in excess in 2017, did your spouse or domestic partner* receive compensation or payment in excess in 2017, did your spouse or domestic partner* receive compensation or payment in excess in 2017, did your spouse or domestic partner* receive compensation or payment in excess in 2017, did your spouse or domestic partner* receive compensation or payment in excess in 2017, did your spouse or domestic partner* receive compensation or payment in excess in 2017, did your spouse or domestic partner* receive compensation or payment in excess in 2017, did your spouse or domestic partner* receive compensation or payment in excess in 2017, did your spouse or domestic partner* receive compensation or payment in excess in 2017, did your spouse or domestic partner* receive compensation or payment in excess in 2017, did your spouse or domestic partner* receive compensation or payment in excess in 2017, did your spouse or domestic partner*	your Partner Position Chicago Park Discover	pacity for any you received are dered to a pestirict, Chicago	y dor Yes - Amount of Incor By Category erson* or entity de o City Colleges, or Yes - Amount of Incor By Category	No N
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n 2017, did you receive compensation in excess of \$5,000.00 for professional", business or of iness" with the City of Chicago, the Chicago Transit Authority, Chicago Board of Education, Citropolitan Pier and Exposition Authority? If YES, provide the following for each person or entity to which you provided services. Nature of Service Government on Service Parson or facts in 2017, did your spouse or domestic partner* receive compensation or payment in excess for other services rendered to a person* or entity doing business* with the City of Chicago, ication, Chicago Park District, Chicago City Colleges, or Metropolitan Figr and Exposition Aut	Chicago Park Dis	strict, Chicago	Participation of the control of the	No N
Service Service Person of Entity 2017, did your spouse or domestic partner* receive compensation or payment in excess con other services rendered to a person* or entity doing business* with the City of Chicago, ration, Chicago Park District, Chicago City Colleges, or Metropolitan Figr and Exposition Aut	s of \$5.000.00 fo		By Category ai*, business, empl	loyment,
a 2017, did your spouse or domestic partner* receive compensation or payment in excess k or other services rendered to a person* or entity doing business* with the City of Chicago, cation, Chicago Park District, Chicago City Colleges, or Metropolitan Figr and Exposition Aut	s of \$5,000,00 fo the Chicago Tra		al*, business, empl	
If YES, provide the following for each person or entity to which Spouse. Domestic Partner p			Yes	∏ No
ne Nature of Government Unit Services Person or Entity			- Amount of incor By Category	me.
n 2017, did any entity in which you OR your spouse or domestic partner* have a financial professional*, business or other services rendered to any person* or entity doing business* vicago Board of Education, Chicago Park District, Chicago City Colleges, or Metropolitan Pier a lit YES, provide the following information about the entity in which you spouse domestic partners were provided.	with the City of 6 and Exposition A partner have a fi	Chicago, the C Authority?	Chicago Transit Au	
ture of Government Unit With vices Which Person Did Business			Amount of Income. Category	
n 2017, did you have a financial interest* in any person* doing business* with the City? «Not esent less than 1/2 of 1% (.05%) of the company's outstanding common stock, or time or dicies or annuities purchased from insurance companies, need not be disclosed.	lemand deposit:	ck interests in s in financial in	publicly held con institutions, or end	npanies to dowment
If YES, provide the following for each person:			hered	

companies that represent les	ancial interest" in any person" conducting business in Chicago? (Note; common stock interests in j is than 1/2 of 1% (.05%) of the company's outstanding common stock, or time or demand deposits policies or annuities purchased from insurance companies, need not be disclosed.)	in financia:	. No
If YES, provide the follow	wing for each person.		
Name	Type / Instrument of Ownership		
residence?	capital gain of \$5,000.00 or more from the sale of any capital asset other than your principal place of sold (including the address or legal description of the real estate) and the appropriate Category of	Yes	No tofgain
realized for each identified	diasset (see note at top of form).		
	+ Amount of Category	fgam, By	
forms of direct or indirect ov residence is in a multiple-un	financial interest" in real estate located in the City of Chicago, other than your principal place of res vnership, such as partnerships or trusts whose corpus consists primarily of real estate. (If your princ it or mixed-use building in which you have a financial interest", answer "yes" to this question.)	Yes Yes	⊡ No
If YFS identify the real legal description:	estate by address (see note at top of form for filers from certain departments). Including zip code, o	r if there is	no address, by
10. In 2017, did you receive aggregate value in excess of	from any person* (other than relatives* or a domestic partner*; one or more gifts having an	Yes	∑ No
If YES identify the pers	on or persons from whom you received such aift":		
11. In 2017, did you receive Governmental Ethics Ordina	any improper gift* that you disposed of in accordance with Section 2-156-144 of the ance?	☐ Yes	No No
if YES, identify the impl	oper gift(s), the donoris: if known, and method of disposal		
13. Commentativity	a financial interest* in any person* or entity who in 2017 applied to the City of Chicago for a license		
or franchise, or any permit f	or annexation, zoning or rezoning of real estate?	L Yes	E No
If YES, list the name of the application sought or the	 person(s) in which you have the financial interest and describe the City action requested includir action requested; 	ig the natur	e of the
Name	Action Requested		
for the City of Chicago in 20 loans of the kind you receiv loans are made at the previous	r anyone owes you more than \$5,000.00, gid the debtor, creditor or guarantor of the debt do busin 177 (Do not include: -1) debt instruments issued by financial institutions whose normal business red in accordance with other terms and conditions standard for such loans at the time the debt wa filling rate of interest: or (2) debt instruments issued by publicly held corporations and purchased is e to the public.)	s contracted by you on th	d, if the ne open
If YES, provide the folk	owing information		
Name of Debtor, Creditor or Guarantor	Is the Person a Debtor, Type of Det Creditor or Guarantor Instrument	ж	
14 Do you now serve on any	board or commission either as a volunteer or for compensation include non-City boards or commissions ?	[·] Yes	No
if YES, provide the Nar Howard Brown Health	neis) of boardis) and your position(s) on the boardise Board		
15. Do you currently have	a relative" or domestic partner" who is registered as a lobbyist with the City's Board of Ethics?	☐ Yes	☑ No
	istis, and the lebbyist's relationship to you. Relationship		
Name(s)	1. City and bottom?		
If YES, name the relative	a relative" or domestic partner" who is an employee or full- or part-owner of a City contractor"? (s) or domestic partner(s), his her their relationship to you, the City contractor(s), and his/her /their	Yes r position w	No with the
Contractor(s)* Name(s)/ relationship(s)	Contractor(s Position(s)		
	e that I have examined this Statement of Financial interests form, including any accompanying documents, an complete. I understand that knowingly if ingla Statement containing false or misleading information, or failing from office or employment sanctions, including discharge, in accordance with applicable rules, regulations and the statement of the statement o		