

**2022 STATEMENT OF FINANCIAL INTERESTS** 

740 N. Sedgwick, Ste. 500 Chicago, IL 60654-8488 (312) 744-9660 To avoid a violation of the Governmental Ethics 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 focially of Chicago later than the close of business Monday, May 2, 2022 to: Board of Ethics, 740 N Sedgwick, Suite \$98 and of Ethic Chicago, IL 60654-8488

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		nis form, sign it and then mail / deliv nd sign your form before returning		cannot accept Statemen	ts via e-mail or fax. Please answer		
	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					
	Office of Emergency	y Communications, or who are build	ng, consumer protection or hea	Ith inspectors need not	Civilian Office Police Accountability, disclose the address of business(es), operties owned, e.g.: "I single-family		
	Last Name:	offer	First Name: M	lortin	Middle Initial:	*: =:	
	Address:		Cibr	han state	E IL Zip Code: 606		
	Address.		- city: _	J. J. State	2 2 p code. <u>{2</u> C <b>(</b> 2		
	City Department/Agen	су:		Title:			
1.	1. In 2021, were you empl	oyed by any governmental unit oth	er than the City of Chicago?		Yes No		
		each governmental unit					
2.	or organization (other	n 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 11,000,00?					
		on provide the following information	A 0			1	
	Name & BRU	Khaugh Type Organ	of Mon Profit	Position Dire	+Amount of Income By Category		
3	business* with the Cit		Authority, Chicago Board of I	Education, Chicago Pa	rendered to a person* or entity doing rk District, Chicago City Colleges, o		
	If YES provide the follow	ing for each person to which you pro	uded services	(D)		-0	
	Name	Nature of Service		ental Unit with son Oid Business	+Amount of Income By Category		
4.	person* or entity doing		the Chicago Transit Authority,	Chicago Board of Ed	usiness or other services rendered to ucation, Chicago Park District, Chicago 021 Yes No		
	If YES, provide the follo	owing for each person to which Spo	use/ Domestic Partner provided	d services:			
	Name	Nature of Service		mental Unit with Person Did Business	+Amount of Income By Calegory		
5	\$5,000_00 for profess Transit Authority, Chi	ional*, business or other services	rendered to any person* or e go Park District, Chicago City	ntity doing business* w Colleges, or Metropo	receive compensation in excess of the City of Chicago, the Chicago ilitan Pier and Exposition Authority	0	
	If YES, provide the falle	owing information about the entity is	) which vau/spouse/domestic p	artner have a financial in	nterest.		
	Name of Person to which Services were provided						
	Nature of Service		Governmental Unit with Which Person Did Business		+Amount of Income By Category		
6.	less than ½ of 1% (	a financial interest* in any person* d ,5%) of the company's outstand ance companies, need not be disclo	oing business* with the City? (N ing stock, or demand deposits	in financial institutions,	blicly held corporations that represen	at s	
	If YES, provide the follo	owing for each person					
	Name	and the second s	Title or Descriptio				

	that represent less than 16 of 1% (5%) of the company's outstanding stock, or demand depos or annuities purchased from insurance companies, need not be disclosed)					
	If YES provide the following for each person					
	Name Type/Instrument of Ownership					
	n 2021, did you realize a capital gain of \$5,000,00 or more from the sale of any capital asset other than your principal place of residence?					
	If YES identify the asset(s) sold probabing the address or legal description of the real estate) and the appulantified asset (see note at top of form).	niopirate Category of the amount of gain realized his eac				
		+Amount of Income By Category				
	to 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 prims of direct or indirect ownership, such as partnerships or trusts whose corpus consists primarily of real estate. (If your principal place of estate is in a multiple-unit or mixed-use building in which you have a financial interest*, answer "yes" to this question.  Yes					
	If YES, identify the real estate by address (see note at top of form for filers from certain departmenting at description	ents), including zip code, or, if there is no address, b				
	In 2021, did you receive from any person* (other than relatives* or a domestic partner*) one	or more gifts having an angrenate value in excess				
	of \$250,00?	Yes No				
	If YES, identify the person or persons from whom you received such gifts	, ~				
	In 2021, did you receive any improper gifts* that you disposed of in accordance with Section 2					
	If YES, identify the improper gift(s), the donor(s) if known, and method of disposal as specified in t	the ordinance				
	Do you <u>currently</u> have a financial interest* in any person* who in 2021 applied to the City of for annexation, zoning or rezoning of real estate?  If YES, list the name of the person(s) in which you have financial interest and describe the City account or the action requested):	Yes No				
	Name Action Requested					
	If you <u>currently</u> owe or anyone owes you more than \$5,000,00, did the debtor, creditor or gu for the City of Chicago in 2021? (Do not include: (1) debt instruments issued by financial making of loans of the kind received by you in accordance with other terms and conditions contracted, if the loans are made at the prevailing rate of interest; or (2) debt instruments is by you on the open market at the price available to the public.)  In either owe nor am owed must be provided the following information:  Name of Debtor,	institutions whose normal business includes the standard for such loans at the time the debt was sued by publicly held corporations and purchased				
	Creditor or Guarantor  Creditor or Guarantor	Instrument				
	Do you now serve on any board or commission (even if not a City board or commission, or n	ot for compensation)?				
	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 County Clerk, or any other unit of local government in the State of Illinois?	of Ethics, the Illinois Secretary of State, th∉ Cook				
	If YES, name the lobbyist(s) and the lobbyist's relationship to you	ν				
	Name(s) Relationship					
	Do you now have any relative* or domestic partner* who is an employee or full- or part-owner of a					
	I TES, name the relative(s) or domestic partner(s), his/heraheir relationship to you, the oty contractorist					
	If YES_name the relative(s) or domestic partner(s), his/hen/their relationship to you, the city contractor(s).  Name(s) of Relationships  Contractor(s)	Position				
1	Name(s) of	Position  Positi				