Board_{of} Ethics

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

If YES, provide the following for each person.

Name

CITY OF CHICAGO

2022 STATEMENT OF FINANCIAL INTERESTS

To avoid a violation of the Covernmental 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 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

City of Chicago 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. NOV 25 2022 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: B= \$5,000 - \$24,999 A= \$25,000 or more C= less than \$5,000 Ву 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." Last Name: Middle Initial: Address: Retired Aviation City Department/Agency: 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 No If YES, for each one Name & Type of +Amount of Income Your 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 Y No If YES, provide the following for each person to which you provided services 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 T Yes If YES, provide the following for each person 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? Yes 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 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 No

Title or Description of Position

Your held in This Person

			npanies, need	not be disclos	sed)			or endowments, Yes V	lo
Name	allowing for e	each person:			Type/Instrumen	t			
In 2021, did you	realize a ca	pital gain of \$	5,000.00 or n	nore from the	sale of any capita	al asset other	than your prin	cipal place of resi	idence
	asset(s) sold (including the ad						nount of gain realize	
								+Amount of Incon By Category	ne
forms of direct or residence is in a r	indirect owi nultiple-unit	nership, such or mixed-use	as partnershi _l building in wh	ps or trusts which you have a	nose corpus cons i financial interest	ists primarily o *, answer "yes	of real estate. " to this questi	of residence? Inc (If your principal pon.) Yes \ \ \ \	place
legal description:								or, if there is no ad	dress,
	532				CHIZO 6				
of \$250.00?			***************		mestic partner*)	one or more gi	fts having an a	ggregate value in Yes N	exces lo
If YES, identify the	e person or p	ersons Irom Wi	nom you recen	ved such gifts:					
								nental Ethics Ordi	
If YES, identify the	improper gi	ft(s), the donor	(s) if known, a	nd melhod of d	isposal as specifie	d in the ordinar	ce		
Do you currently	have a fina	ncial interest*	in any person	* who in 2021	applied to the Ci	ty of Chicago	for a license o	r franchise, or any	у реп
If YES, list the nai	me of the per	rson(s) in which						Yes N	
Name	n requested).			ction Requested				
for the City of Ci making of loans contracted, if the	hicago in 20 of the kind r loans are m en market a	D21? (Do not in eceived by you nade at the preat the preat the price avails.)	include: (1) do u in accordant evailing rate of ilable to the p	ebt instrument ace with other f interest; or (2 ublic.)	s issued by finar terms and conditi t) debt instrument	ncial institution ons standard t is issued by pu	s whose norm for such loans ablicly held cor	usiness* with or or all business inclu- at the time the de- porations and pur	des the ebt was rchase
				☐ I neithe	r owe nor am ow	ed more than S	\$5,000.00	Yes N	10
If YES, provide the Name of Debtor, Creditor or Guar		formation.			e Person a Deblor, ilor or Guarantor		Type of De		
Do you now serv		ard or commis	sion (even if r			or not for com		Yes The	6
If YES, provide the	Name(s) of	board(s) and y	vour position(s	on the board(5):				
Do you <u>currently</u> County Clerk, or	have a cove any other ur	red relative* w	tho is registere	ed as a lobbyis e State of Illino	t with the City's B	oard of Ethics,	the Illinois Se	cretary of State, th	ne Co
If YES, name the	obbyist(s) ar	nd the tobbyist's	s relationship t	o you:	7				
Name(s)					elationship				
					_	_		Yes N	
Name(s) of Relationships	stive(s) or do	mestic partnerts), his/her/their i	Contractor(s)			Position Position	with the contractor(s	5).
FICATION: I declar f it is true and com val from office or in	plete. I unde	rstand that kno	wingly filing a	Statement conta	sining false or miste	ading information	on or failing to fi	e best of my knowle le by deadline, can he City of Chicago.	result