

Name

CITY OF CHICAGO 2022 STATEMENT OF FINANCIAL INTERESTS

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 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

- 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, 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:			First Name:			Middle Initial:
Address:			City:	;	State:	Zip Code:
City Department/Agency:				Title:		
In 2021, were you employed	by any governmental ur	nit other than the	City of Chicago?			Yes No
If YES, list the name of each	governmental unit:					
In 2021, did you serve as or organization (other than \$1,000.00?	n your City employment	or appointment)	from which you rece	ived or derived i	ncome of mo	re than
If YES, for each organization p Name & Address	-	mation: (see note a Type of Organization	above)	Your Position		+Amount of Income By Category
In 2021, did you receive co			,			
Metropolitan Pier and Exp	osition Authority? for each person to which you Natur	ou provided servic	es: Government	al Unit with		t, Chicago City Colleges Yes No +Amount of Income
Metropolitan Pier and Exp If YES, provide the following to the Name In 2021, did your spouse or person* or entity doing bus City Colleges, or Metropolitation.	Nature Services r domestic partner* receinness* with the City of Chan Pier and Exposition Automatical Control of Channel Co	pu provided service re of ce eive compensation nicago, the Chicagothority?	Government Which Perso n in excess of \$5,000.0 go Transit Authority, C I had no spouse or	al Unit with n Did Business 0 for professional nicago Board of domestic partner	*, business or	+Amount of Income By Category other services rendered to
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Metropolitan Pier and Exp If YES, provide the following to Name In 2021, did your spouse of person* or entity doing bus City Colleges, or Metropolita If YES, provide the following t	Nature of Service which you OR your services to be sort of Education, Common of the c	pou provided service re of ce eive compensation nicago, the Chicago thority?	Government Which Perso n in excess of \$5,000.0 go Transit Authority, C I had no spouse or stic Partner provided s Governm Which Person estic partner* have to any person* or ent strict, Chicago City C	al Unit with n Did Business 0 for professional nicago Board of domestic partner services: ental Unit with rson Did Business a financial inter ty doing busines colleges, or Met	*, business or of Education, C in 2021 est* receive composition Pier	+Amount of Income By Category other services rendered to Chicago Park District, Chicago Park District Park
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Your held in This Person

	that repre	esent less than		ompany's outstanding s	tock, or demand de	posits in financial institu	tions, or endowments, policie			
1	f YES, pro	vide the following	g for each person:		Type/Instrument	:				
. I	n 2021, d				sale of any capita	ll asset other than your	principal place of residence			
		ntify the asset(s) sset (see note at		ss or legal description of ti	ne real estate) and the	e appropriate Category of th	+Amount of Income By Category			
f	orms of d	lirect or indired is in a multiple	et ownership, such as per- -unit or mixed-use build	partnerships or trusts we ding in which you have	vhose corpus consi a financial interest					
	If YES, id legal desc		estate by address (see n	ote at top of form for file	ers from certain depa	artments), including zip co	ode, or, if there is no address,			
0.			e from any person* (oth				an aggregate value in exces			
	If YES, id	lentify the perso	n or persons from whom	n you received such gifts	:					
1.	In 2021, (did you receive		•		ion 2-156-144 of the Gov	vernmental Ethics Ordinance			
	If YES, id	lentify the impro	per gift(s), the donor(s) i	if known, and method of	disposal as specified	d in the ordinance				
						ty of Chicago for a licen	se or franchise, or any perm			
		st the name of to the action requ		u have financial interest	and describe the Ci	ty action requested (includ	ding the nature of the applicat			
	Name				Action Requested					
	for the C making o contracte by you or	rou currently 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 the City of Chicago in 2021? (Do not include: (1) debt instruments issued by financial institutions whose normal business includes the aking 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 intracted, if the loans are made at the prevailing rate of interest; or (2) debt instruments issued by publicly held corporations and purchased you on the open market at the price available to the public.) I neither owe nor am owed more than \$5,000.00 Yes No								
	If YES, pi	rovide the follov	ving information:							
		f Debtor, or Guarantor			the Person a Debtor, editor or Guarantor	''	of Debt Iment			
4.	Do you n	ow serve on a	ny board or commissior	n (even if not a City bo	ard or commission,	or not for compensation	n)?			
	If YES, pr	rovide the Name	e(s) of board(s) and your	r position(s) on the board	d(s):					
5.			covered relative* who her unit of local governi				s Secretary of State, the Coc			
	If YES, na		t(s) and the lobbyist's rel		Relationship					
6.			ative* or domestic partne			of a City contractor?	Yes No			
,	f YES. nan	ne the relative(s)	or domestic partner(s). h	is/her/their relationship to	vou. the city contracto	or(s), and his/her /their pos	ition with the contractor(s):			
	Name(s Relation	s) of		Contractor		Position	,			
elie	f it is true	and complete.	I understand that knowin	gly filing a Statement co	ntaining false or misle	mpanying documents, and ading information or failing, regulations and ordinances	to the best of my knowledge an g to file by deadline, can result is s of the City of Chicago.			