

STATEMENT OF ECONOMIC INTERESTS

TO BE FILED WITH THE DEKALB COUNTY CLERK

(Type or print name and address on the lines below.)

NAME:	
HOME MAILING ADDRESS:	
E-MAIL ADDRESS (Preferred & Optional):	
UNIT OF GOVERNMENT(S) THAT REQUIRES YOU TO FILE THIS FORM:	
POSITION(S) FOR WHICH THIS STATEMENT IS FILED:	
GENERAL DIRECTIONS	
You may find the following documents helpful to you in completing this form: (1) federa attachments, and forms; and (2) investment and brokerage statements. To complete this form or report interests relating either to political committees registered with the Illinois State campaign committees, or authorized committees registered with the Federal Election Committee public. You must answer all 6 questions. Certain questions will ask you to report any appineld jointly by, or payable to, you with your spouse; or held jointly by, or payable to, you whether an interest should be reported, please consult your department's ethics officer, if apis complete and accurate. If you need more space than the form allows, please attach additional State Officials and Employees Ethics Act, your ethics officer must review your statement of ethe statement in good faith and within the prescribed deadline may subject you to fines, im 1. If you have any single asset that was worth more than \$10,000 as of the end of the proname, held jointly by, or payable, to you with your spouse, or held jointly by, or payable the case of investment real estate, list the city and state where the investment real e "none" below.	m, you do not need to disclose specific amounts or values Board of Elections or to political committees, principal mission. The information you disclose will be available to blicable assets or debts held in, or payable to, your name; with your minor child. If you have any concerns about oplicable. Please ensure that the information you provide tional pages for your response. If you are subject to the economic interests before you file it. Failure to complete prisonment, or both. eceding calendar year and is held in, or payable to, your let to you with your minor child, list such assets below. In
 Excluding the position for which you are required to file this form, list the source of a during the preceding calendar year. If you sold an asset that produced more than \$7,50 name of the asset and the transaction date on which the sale or transfer took place. If below. 	00 in capital gains in the preceding calendar year, list the
Source of Income / Name of Asset	Date Sold (if applicable)
COMPLETE BUT DO NOT DETACH This section will be returned to you when the Statement is filed with the County Clerk. Unit of Government and Position for which this statement is filed:	Receipt is hereby acknowledged of your Statement of Economic Interests, filed pursuant to the Illinois Government Ethics Act. The Statement was filed on this date:
Name:	
Home Mailing Address:	

.	debt in the preceding calendar year exceeding \$10,000, list the credic creditor for all applicable debts owed by you, owed jointly by you witto the types of debts listed above, you do not need to report any desecured by automobiles, household furniture or appliances, as long members of your family, or debts to or from a political committee registered with the principal campaign committee, or authorized committee registered with the principal campaign committee, or authorized committee registered with the preceding calendary part of the principal campaign committee, or authorized committee registered with the preceding statement of the principal campaign committee.	itor of the debt ith your spouse bts to or from gas the debt w gistered with th	below. If you had no such debts, list "r, or owned jointly by you with your min financial institutions or government age as made on terms available to the gen e Illinois State Board of Elections or any	none" below. List the nor child. In addition encies, such as debts eral public, debts to	
1.	List the name of each unit of government of which you or your special calendar year other than the unit or units of government in relation to of the contractual services.				
	Name of Unit of Government		Title or Nature of Service		
i.	If you maintain an economic relationship with a lobbyist or if a member of your family is known to you to be a lobbyist registered with any unit of government in the State of Illinois, list the name of the lobbyist below and identify the nature of your relationship with the lobbyist. If you do not have an economic relationship with a lobbyist or a family member known to you to be a lobbyist registered with any unit of government in the State of Illinois, list "none" below.				
	Name of Lobbyist		Relationship to Filer		
5.	List the name of each person, organization, or entity that was the so aggregate in excess of \$500 received during the preceding calendar y gift or gifts from a member of your family that was not known to be you had no such gifts, list "none" on next page.	year and the typ	pe of gift or gifts, or honorarium or hono	oraria, excluding any	
	Name of Person/Organization		Type of Gift		
7.	List the name of any spouse or immediate family member living with and the name of the public utility that employs the relative.	the person ma	king this statement employed by a publ	ic utility in this State	
	Name and Relation		Public Utility		
	VEDICI	CATION			
and ncc	eclare that this statement of economic interests (including any attachments) hat complete statement of my economic interests as required by the Illinois Gomplete statement is a fine not to exceed \$2,500 or imprisonment in a penarisonment."	s been examined overnmental Eth	cs Act. I understand that the penalty for w	villfully filing a false or	
	SIGNATURE OF FILER		DATE		
	PRINTED NAME OF FILER	_			

DO NOT DETACH (WILL BE RETURNED AS YOUR RECEIPT)