32010 026075

## STATEMENT OF ECONOMIC INTERESTS TO BE FILED WITH THE SECRETARY OF STATE



(Type or Hand Print Name and Address in the blank space)

JACK	FRANKS	

INDEX DEPARTMENT

MAY 03 2010

IN THE OFFICE OF SECRETARY OF STATE

## REPRESENTATIVE IN THE GENERAL ASSEMBLY

(List each Office or Position of Employment for which this Statement is Filed)

## **GENERAL DIRECTIONS**

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement.

If additional space is needed, please attach supplemental listing.

1. List the name and instrument of ownership in any entity doing business in the State of Illinois, in which the ownership interest held by the person at the date of filing is in excess of \$5,000 fair market value or from which dividends in excess of \$1,200 were derived during the preceding calendar year. (In the case of real estate, location thereof shall be listed by street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument need be listed.

Business Entity	Instrument of Ownership	
Franks, Gerkin & McKenna, P.C.	Partnership	
State Bank Group	Stock	
Castle Bank, N.Ā.	Stock	
Bricton Group	Stock	
Doctors Direct Insurance Company	Stock	
777, LLC	Stock	

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of \$1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice_
Franks, Gerkin & McKenna P.	C. 10333 E. GrantyHwy.	Marengo, IL 60152 Partner
State Bank Group 7256	Hancock Dr., Wonder Lake	. IL 60096 Bank Director
Bricton Group 1030	HigginssRd, #260, "Park R	idge, 11 60068 Director
Franks, Gerkin & McKenna P. State Bank Group 7256  Bricton Group 1030 Doctors Direct Ins. Co.	1100 Jorie Blvd, #355, 08	ak Brook, IL Director
777 LLC 19333 E. Grant Hwy	, PO Box 5, Marengo, IL	60152 Director

3. List the nature of professional services rendered (other than to the State of Illinois) to each entity from which income exceeding \$5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

Provided legal services to warious entities during the preceding calendar year.

I received in excess of \$5,000.00 for my services, served as Bank

Director, receiving income from Castle Bank, N.A. and State Bank Group

of \$5,000 or more was realized during th	ne preceding calendar year.	
NONE		
association, including the name of the lo	bbyist and specifying the legislative ma	the statement maintains a close economic atter or matters which are the object of the e client or principal on whose behalf tha Client or Principal
NONE		
during the preceding calendar year other	r than for professional services and the e, location thereof shall be listed by	h income in excess of \$1,200 was derived title or description of any position held in street address, or if none, then by lega instrument need be listed.
Entity		Position Held
State Bank Group Divi	dends & Director's Fees	Director
Castle Bank, N.A.	Director's Fees	Director
Calendar year other than the unit or units The law firm of Franks, G Huntley, Greenwood Twnshp	of government in relation to which the erkin & McKenna represen , Alden Twnshp & Hebron	ted the Village of
beemnappointed counse1 in 8. List the name of any entity from whice excess of \$500, was received during the	h a gift or gifts, or honorarium or hono	oraria, valued singly or in the aggregate in
NONE		
		<u> </u>
	VERIFICATION	
examined by me and to the best of my k	cnowledge and belief is a true, correct ernmental Ethics Act. I understand that not to exceed \$1,000 or	ring schedules and statements) has been and complete statement of my economic at the penalty for willfully filing a false or other than the
		4-8-10
	(Signature of	Person Making the Statement) (Date)

NOTE: This statement is to be filed in the Office of the Secretary of State, Ethics Section, Index Department, 111 East Monroe, Springfield, Illinois 62756