List the identity (including address or legal description of real estate) of any capital asset from which a capital gain of \$5,000 or (1881 | 1881 | 1881 | 1881 | 1881 | 1881 | 1 Name Ron Stone Each Office or Position of Employment for which this Statement is Filed: **Board Member, Clark County Park District** MAR 0 1 2014 Full Post Office Address: 17896 N Oak Ridge Ave, Marshall, IL 62441 **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 more space is needed, please attach supplemental listing. 1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, 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 received during the preceding calendar year: (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed. **Position of Management** Instrument of Ownership **Business Entity** 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: Type of Practice Stack Holder

List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) 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:

<u> </u>	None -
5.	List the name of any entity and the nature of the governmental action requested by any entity that has a government in relation to which the person must file for any license, franchise or permit for annexation, zon estate during the preceding calendar year, if the ownership interest of the person filing is in excess of \$5,0 the time of filing, or if income or dividends in excess of \$1,200 were received by the person filing from preceding calendar year:
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6.	List the name of any entity doing business with a unit of local government in relation to which the person is which income in excess of \$1,200 was derived during the preceding calendar year other than for professional of description of any position held in that entity: (No time or demand deposit in a financial institution nor any be listed.)
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8.	List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggree \$500, was received during the preceding calendar year:
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	VERIFICATION
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