Statement of Economic Interaction be Filed with the County

Your Name Was Submitted For Filing by an Entity That You Represent (Type or Print)

Name:		
Each Office or Position of Employn	nent for which this Statement is Filed:	
	STEVE MAROON 911 BRD MEMBER (CUMBERLAND COUNTY) 1259 DOGWOOD AVE NEOGA IL 62447	Received FEB 17 2009
	C	Julie Gentry County Clerk
		- GIGIK
full Post Office Address:		
	GENERAL DIRECTIONS	
pe the same as the interest of the space is needed, please attach so that the name and instrument or person is required to file, in wh	f ownership in any entity doing business with a unit of local go ich the ownership interest held by the person at the date of fili	overnment in relation to which is in excess of \$5,000 fair
the the same as the interest of the space is needed, please attach so because is needed, please attach so because is required to file, in who ket value, or from which divident location thereof shall be listed to cial institution, nor any debt in a business Entity	person making the statement. Campaign receipts shall not be in upplemental listing. If ownership in any entity doing business with a unit of local going the ownership interest held by the person at the date of filing distinctions of \$1,200 were received during the preceding calendary the street address, or if none, then by legal description.) No the street address, or if none, then by legal description.)	overnment in relation to which not in excess of \$5,000 fair ar year: (In the case of real ex
the same as the interest of the space is needed, please attach so that the name and instrument or person is required to file, in who ket value, or from which dividen location thereof shall be listed in cial institution, nor any debt in	person making the statement. Campaign receipts shall not be in upplemental listing. If ownership in any entity doing business with a unit of local go ich the ownership interest held by the person at the date of filids in excess of \$1,200 were received during the preceding calend by the street address, or if none, then by legal description.) No testrument shall be listed.	overnment in relation to which is in excess of \$5,000 fair ar year: (In the case of real excime or demand deposit in a f
the same as the interest of the space is needed, please attach so the space is required to file, in who ket value, or from which divident location thereof shall be listed to cial institution, nor any debt in the space of the spac	person making the statement. Campaign receipts shall not be in upplemental listing. If ownership in any entity doing business with a unit of local going ich the ownership interest held by the person at the date of filids in excess of \$1,200 were received during the preceding calend by the street address, or if none, then by legal description.) No testrument shall be listed. Instrument of Ownership of practice of any professional organization in which the person or proprietor, or served in any advisory capacity, from which incomes	overnment in relation to which overnment in relation to which one is in excess of \$5,000 fair ar year: (In the case of real estime or demand deposit in a formal of the control of the con
the same as the interest of the space is needed, please attach so the space is required to file, in who ket value, or from which divident location thereof shall be listed to cial institution, nor any debt in the space space. Business Entity Business Entity List the name, address and type cer, director, associate, partner of	person making the statement. Campaign receipts shall not be in upplemental listing. If ownership in any entity doing business with a unit of local going ich the ownership interest held by the person at the date of filids in excess of \$1,200 were received during the preceding calend by the street address, or if none, then by legal description.) No testrument shall be listed. Instrument of Ownership of practice of any professional organization in which the person or proprietor, or served in any advisory capacity, from which incomes	overnment in relation to which overnment in relation to which one is in excess of \$5,000 fair ar year: (In the case of real estime or demand deposit in a formal of the control of the con
List the name and instrument or person is required to file, in wh ket value, or from which dividential institution, nor any debt in Business Entity Business Entity List the name, address and type cer, director, associate, partner of during the preceding calendar your management of the preceding calendar your management o	person making the statement. Campaign receipts shall not be in upplemental listing. If ownership in any entity doing business with a unit of local going ich the ownership interest held by the person at the date of filing in excess of \$1,200 were received during the preceding calend by the street address, or if none, then by legal description.) No testrument shall be listed. Instrument of Ownership of practice of any professional organization in which the person or proprietor, or served in any advisory capacity, from which income ar:	overnment in relation to which overnment in relation to which one is in excess of \$5,000 fair ar year: (In the case of real extime or demand deposit in a formal of the control of the con

more was realized during th	address or legal description of r he preceding calendar year:	eal of any capital	l asset from which a capita	\$5,000 or
NONE				
	110.00			
government in relation to w estate during the preceding	and the nature of the governme which the person must file for any g calendar year, if the ownership ome or dividends in excess of \$1,	/ license, franchise or per interest of the person fil	rmit for annexation, zoning ing is in excess of \$5,000 f	or rezoning of real air market value at
which income in excess of \$	doing business with a unit of loo \$1,200 was derived during the prion held in that entity: (No time	eceding calendar year otl	her than for professional se	rvices and the title
314,670				
	f government that employed the overnment in relation to which t			alendar year, other
	r from which a gift or gifts, or he the preceding calendar year:		valued singly or in the agg	regate in excess of
		RIFICATION		
and to the best of my knowled Illinois Governmental Ethics Ad	of Economic Interests (including a dge and belief is a true, correct ct. I understand that the penalty Thent in a penal institution other	and complete statement for willfully filing a fals	of my economic interests e or incomplete statement	as required by the shall be a fine not

Signature of Person Making Statement

Date

onment.

Your Name Was Submitted For rung by an Entity That You Represent STATEMENT OF ECONOMIC INTERESTS TO BE FILED WITH THE COUNTY CLERK

(Type or Hand Print)

N	a	m	e	

STEVE MAROON

Business Entity

Each office or position of employment for which this statement is filed.

STEVE MAROON MULTI-TOWN CLERK (CUMBERLAND COUNTY) 1259 DOGWOOD AVE NEOGA IL 62447

FILED
FEB 1 8 2010

CLERK & RECORDER

Position of Management

Full post office address to which notification of an examination of this statement should be sent.

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 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.

Instrument of Ownership

NONE	<u> </u>
	zation in which the person making the
statement was an officer, director, ass income in excess of \$1,200 was derive	d in any advisory capacity, from which

Name Address Type of Practice

None

Address

3. 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.

NONE

gain of \$5,000 or more was realized during the preceding calendar year. None Work This the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of \$5,000 or more was realized during the preceding calendar year.
5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit fo annexation, zoning of rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of \$5,000 fair market value at the time of filing or if income or dividends in excess of \$1,200 were received by the person filing from the entity during the preceding calendar year. NONE
6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of \$1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.
NONE
7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.
8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500, was received during the preceding calendar year.
VERIFICATION
"I declare that this statement of economic interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."
Signature of person making the statement) (date)

V	(Type or Hand Print)	
Name		
ach office or position of employment fo	or which this statement is filed.	
911 BO	STEVE MAROON ARD MEMBER (CUMBERLAND COUNTY 91 1259 DOGWOOD AVE NEOGA IL 62447	
	NEOOA IE OZTAI	Received
		FEB 0 4 2011
		Cumberland County Cleri & Recorder
Full post office address to which notifice	ation of an examination of this statement should be se	
	General Directions	
oe considered to be the same as th	lled by the person making the statement) of a spo e interest of the person making the statement. Co	
included in this statement. If additi	onal space is needed, please attach supple	
1. List the name and instrument of one to which the person is required to fixexcess of \$5,000 fair market value contained are greated as the case of real estimated.		mental listing. of local government in relation reson at the date of filing is in received during the preceding dress, or if none, then by lego
1. List the name and instrument of or which the person is required to fixexcess of \$5,000 fair market value of calendar year. (In the case of real est	onal space is needed, please attach supple ownership in any entity doing business with a unit of le, in which the ownership interest held by the peor from which dividends in excess of \$1,200 were atte, location thereof shall be listed by the street adposit in a financial institution, nor any debt instruction.	mental listing. of local government in relation reson at the date of filing is in received during the preceding dress, or if none, then by lego
1. List the name and instrument of to which the person is required to fivexcess of \$5,000 fair market value of calendar year. (In the case of real est description.) No time or demand description.) Business Entity Business Entity List the name, address and typestatement was an officer, director, of	onal space is needed, please attach supple ownership in any entity doing business with a unit of le, in which the ownership interest held by the peor from which dividends in excess of \$1,200 were atte, location thereof shall be listed by the street adposit in a financial institution, nor any debt instruction.	emental listing. In local government in relation of local government in relation or son at the date of filing is in received during the preceding dress, or if none, then by legal ment shall be listed. In sition of Management which the person making the
List the name and instrument of a which the person is required to fixcess of \$5,000 fair market value a calendar year. (In the case of real est description.) No time or demand de Business Entity Business Entity List the name, address and type tatement was an officer, director, ancome in excess of \$1,200 was der	onal space is needed, please attach supple ownership in any entity doing business with a unit calle, in which the ownership interest held by the people from which dividends in excess of \$1,200 were not attend to a financial institution, nor any debt instruction in a financial institution, nor any debt instruction. Instrument of Ownership Polynomials of practice of any professional organization in associate, partner or proprietor or served in any other street in the content of the	emental listing. In local government in relation of local government in relation or son at the date of filing is in received during the preceding dress, or if none, then by legarment shall be listed. In solition of Management which the person making the
1. List the name and instrument of co which the person is required to fixexcess of \$5,000 fair market value of calendar year. (In the case of real est description.) No time or demand description.) Business Entity Business Entity List the name, address and type statement was an officer, director, of the come in excess of \$1,200 was derived.	onal space is needed, please attach supple ownership in any entity doing business with a unit of le, in which the ownership interest held by the people from which dividends in excess of \$1,200 were not attacked by the street adaposit in a financial institution, nor any debt instrument of Ownership Instrument of Ownership Positive of practice of any professional organization in associate, partner or proprietor or served in any dived during the preceding calendar year.	emental listing. of local government in relation are at the date of filing is in received during the preceding dress, or if none, then by legarment shall be listed. osition of Management which the person making the advisory capacity, from which

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capita gain of \$5,000 or more was realized during the preceding calendar year.
NONE
5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning of rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of \$5,000 fair market value at the time of filing or if income or dividends in excess of \$1,200 were received by the person filing from the entity during the preceding calendar year.
NONE
6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of \$1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.
7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.
8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500, was received during the preceding calendar year.
None
VERIFICATION
"I declare that this statement of economic interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

(signature of person making the statement)

02/03/11 (date)

YOUR NAME WAS SUBMITTED FOR FILING BY AN ENTITY THAT YOU REPRESENT

STATEMENT OF ECONOMIC INTERESTS TO BE FILED WITH THE COUNTY CLERK

Office or Position of Employment for which this statement is filed:

Received

911 Board Member

JAN 25 2012

TO:

Steve Maroon

1259 Dogwood Ave Neoga, IL 62447 Cumberland County Clerk & Recorder

Full Post office address to which notification of an examination of this statement should be sent if other than above

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 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 case of real estate, location thereof shall be listed by the street address, or if none, then by the legal description." No time or demand deposit in neither a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
the statement was an	ess and type of practice of any professional of officer, director, associate, partner or propr in excess of \$1,200 was derived during the p	ietor or served in any advisory capacity,
Name	Address	Type of Practice
relation to which the	rofessional services rendered (other than to the person is required to file) to each entity from ional services rendered during the preceding	m which income exceeding \$5,000 was
NONE		

This will be returned to you When statement is filed in the

(Complete but do not Detach)

Receipt is hereby acknowledged by your

	NONE
5.	List the name of any entity and the nature of the government action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of \$5,000 fair market value at the time of filing or if income or dividends in excess of \$1,200 were received by the person filing from the entity during the preceding calendar year.
/	JONE
5.	List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of \$1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.
	List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.
7.	
	JONE
	List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500.00 was received during the preceding calendar year.
7. 8.	List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in

"I declare that this statement of economic interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Government Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Signature of person making the statement) (Date)

Tour Name Was Submitted For rung by an Entity That You Represent STATEMENT OF ECONOMIC INTERESTS TO BE FILED WITH THE COUNTY CLERK

	(Type or Hand Print)	
Name		
Each office or position of employment for	which this statement is filed.	
•	STEVE MAROON	
911 BOA	RD MEMBER (CUMBERLAND CO	UNTY 911)
	1259 DOGWOOD AVE	Received
	NEOGA IL 62447	
		MAR 0 8 2013
		Cumberland County C & Recorder
<u>.</u>		
Full post office address to which notification	on of an examination of this statement sho	ould be sent.
	General Directions	
	interest of the person making the state	t) of a spouse or any other party, shall ment. Campaign receipts shall not be a supplemental listing.
to which the person is required to file, excess of \$5,000 fair market value or	, in which the ownership interest held I from which dividends in excess of \$1,20 e, location thereof shall be listed by the	street address, or if none, then by legal
Business Entity	Instrument of Ownership	Position of Management
NONE		
	sociate, partner or proprietor or served	zation in which the person making the d in any advisory capacity, from which
Name	Address	Type of Practice
None		
which the person is required to file) to		units of local government in relation to g \$5,000 was received for professional the statement.
NONE		

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capita gain of \$5,000 or more was realized during the preceding calendar year.
NONE
5. List the frame of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit fo annexation, zoning of rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of \$5,000 fair market value at the time of filing or if income or dividends in excess of \$1,200 were received by the person filing from the entity during the preceding calendar year.
6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of \$1,200 was derived during the preceding calendar year other than for
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VERIFICATION
"I declare that this statement of economic interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."
(signature of person making the statement) O2 (0 6 (13)
(dule)

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STATE MARAIN		
Name)	(Type or Print)	
9-1-1 Bed		
each Office or Position of Employment for which this Statement	t is Filed)	
911 BOAF	STEVE MAROON RD MEMBER (CUMBERLAND COU 1259 DOGWOOD AVE	JNTY 911)
	NEOGA IL 62447	Received
		FEB 1 4 2014
1259 DOGWOD M	F	Cumberland County Clerk & Recorder
Full Post Office Address)	~	
	GENERAL DIRECTIONS	
ne as the interest of the person making the stat ease attach supplemental listing.	tement. Campaign receipts shall not be include	ed in this statement. If more space is needed ,
ne as the interest of the person making the state ase attach supplemental listing. List the name and instrument of ownership in required to file, in which the ownership interes which dividends in excess of \$1,200 were receisted by the street address, or if none, then be	tement. Campaign receipts shall not be included any entity doing business with a unit of local part held by the person at the date of filing is in eived during the preceding calendar year: (In the	ed in this statement. If more space is needed , government in relation to which the person is a excess of \$5,000 fair market value, or from the case of real estate, location thereof shall be
ne as the interest of the person making the state ase attach supplemental listing. List the name and instrument of ownership in required to file, in which the ownership interes which dividends in excess of \$1,200 were received by the street address, or if none, then I	tement. Campaign receipts shall not be included any entity doing business with a unit of local part held by the person at the date of filing is in eived during the preceding calendar year: (In the	ed in this statement. If more space is needed , government in relation to which the person is a excess of \$5,000 fair market value, or from the case of real estate, location thereof shall be
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List the name and instrument of ownership in required to file, in which the ownership interest by the street address, or if none, then linstrument shall be listed. Business Entity List the name, address and type of practice of officer, director, associate, partner or proprie	any entity doing business with a unit of local gest held by the person at the date of filing is in eived during the preceding calendar year: (In the by legal description.) No time or demand de Instrument of Ownership	government in relation to which the person is a excess of \$5,000 fair market value, or from the case of real estate, location thereof shall be eposit in a financial institution, nor any debt reposition of Management Position of Management
List the name and instrument of ownership in required to file, in which the ownership interested by the street address, or if none, then linstrument shall be listed. Business Entity List the name, address and type of practice of officer, director, associate, partner or proprie	any entity doing business with a unit of local gest held by the person at the date of filing is in eived during the preceding calendar year: (In the by legal description.) No time or demand de Instrument of Ownership	government in relation to which the person is a excess of \$5,000 fair market value, or from the case of real estate, location thereof shall be eposit in a financial institution, nor any debt reposition of Management Position of Management
List the name and instrument of ownership in required to file, in which the ownership interested by the street address, or if none, then linstrument shall be listed. Business Entity List the name, address and type of practice of officer, director, associate, partner or propried derived during the preceding calendar year:	any entity doing business with a unit of local gest held by the person at the date of filing is in eived during the preceding calendar year: (In the by legal description.) No time or demand de Instrument of Ownership of any professional organization in which the etor, or served in any advisory capacity, from	government in relation to which the person is a excess of \$5,000 fair market value, or from the case of real estate, location thereof shall be exposit in a financial institution, nor any debte a position of Management Position of Management person making the statement was an which income in excess of \$1,200 was
List the name, address and type of practice o officer, director, associate, partner or proprie derived during the preceding calendar year:	any entity doing business with a unit of local gest held by the person at the date of filing is in eived during the preceding calendar year: (In the local gest) by legal description.) No time or demand description of any professional organization in which the etor, or served in any advisory capacity, from Address Address	government in relation to which the person is a excess of \$5,000 fair market value, or from the case of real estate, location thereof shall be exposit in a financial institution, nor any debt a person making the statement was an which income in excess of \$1,200 was Type of Practice

4.	List the identity funding address or legal description of real fany capital asset from which a capital gain of the preceding calendar year:
	MIE
5.	List the name of any entity and the nature of the governmental action requested by any entity that has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year, if the ownership interest of the person filing is in excess of \$5,000 fair market value at the time of filing, or if income or dividends in excess of \$1,200 were received by the person filing from the entity during the preceding calendar year:
	1/11/2
6.	List the name of any entity doing business with a unit of local government in relation to which the person is required to file, from which income in excess of \$1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity: (No time or demand deposit in a financial institution nor any debt instrument need be listed.)
	ME
7.	List the name of any unit of government that employed the person making the statement during the preceding calendar year, other than the unit or units of government in relation to which the person is required to file:
	Me
8.	List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500, was received during the preceding calendar year:
_	MINE
	VERIFICATION
	leclare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois

Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed \$1,000, or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment.

(Signature of Person Making Statement

(Date)