

**Your Name Was Submitted For Filing by an Entity That You Represent**  
**STATEMENT OF ECONOMIC INTERESTS TO BE FILED WITH THE COUNTY CLERK**  
 (Type or Hand Print)

Name

William M. Mayer

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

DuPage Township - Township Supervisor

 2007 APR 30 P 2:34  
 NANCY SCHULTZ VODTS  
 COUNTY CLERK  
 WILL COUNTY, ILLINOIS

FILED

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.

Business Entity	Instrument of Ownership	Position of Management
NA		

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
NA		

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.

NA

4. List 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.

NA

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 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.

NA

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.

NA

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.

NA

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.

NA

#### 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)

4-30-07

Printed by authority of the State of Illinois. August 2006 — 75M — 1107.7

**DO NOT DETACH**  
**(WILL BE RETURNED AS YOUR RECEIPT)**

# Statement of Economic Interests to be Filed with the County Clerk

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

Name:

William M. Mayer

Each Office or Position of Employment for which this Statement is Filed:



11280

DuPage Township - Township Supervisor

200 OCT -1 A 11:00 AM

Full Post Office Address:



## 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.**

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Business Entity

Instrument of Ownership

Position of Management

NA

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

NA

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:

NA

4. List the identity (including 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:

NA

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:

NA

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.)

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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:

NA

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:

NA

#### 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 Statement

4-30-08  
Date



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

Name William M. (Type or Hand Print) B:11 " mager  
CANDIDATE FOR:  
Dupage Township Supervisor  
Each office or position of employment for which this statement is filed.

**FILED**  
JAN 16 P 1:42  
NANCY SCHULTZ VOOTIS  
COUNTY CLERK  
WILL COUNTY, ILLINOIS

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

[REDACTED ADDRESS]

**General Directions**

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Business Entity	Instrument of Ownership	Position of Management
<u>NA</u>		

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
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NA

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.

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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.

NA

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.

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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)

(date)

1-13-08

# Statement of Economic Interests to be Filed with the County Clerk

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

Name:

William M. Mayer

Each Office or Position of Employment for which this Statement is Filed:



11280

DuPage Township - Township Supervisor

FILED  
2009 MAY -5 P 2:33  
KANE COUNTY CLERK  
WILL COUNTY, ILLINOIS

Full Post Office Address:

[Redacted Address]

## GENERAL DIRECTIONS

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Business Entity

Instrument of Ownership

Position of Management

NA

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

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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:

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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:

NA

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:

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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 Statement

4-15-09  
Date

**Statement of Economic Interests to be Filed with the County Clerk**  
**Your Name Was Submitted For Filing by an Entity That You Represent**  
(Type or Print)

Name: **William M. Mayer**

Each Office or Position of Employment for which this Statement is Filed:



11280

**DuPage Township - Township Supervisor**

Complete Residential Mailing Address:

[REDACTED ADDRESS]

**GENERAL DIRECTIONS**

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Business Entity	Instrument of Ownership	Position of Management
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Call one Sales Executive

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:

NA

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.

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#### VERIFICATION

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Signature of Person Making the Statement

4-29-10  
Date

**Statement of Economic Interests to be Filed with the County Clerk**  
**Your Name Was Submitted For Filing by an Entity That You Represent**  
(Type or Print)

Name: **William M. Mayer**

Each Office or Position of Employment for which this Statement is Filed:

**DuPage Township - Township Supervisor**



Complete Residential Mailing Address:

[Redacted Address]

**GENERAL DIRECTIONS**

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Business Entity	Instrument of Ownership	Position of Management
NA		

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
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Call one

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:

NA

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.

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Signature of Person Making the Statement

4-2-11  
Date

# Statement of Economic Interests to be Filed with the County Clerk

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

Name:

William Mager

Township Supervisor

Each Office or Position of Employment for which this Statement is Filed:

Full Post Office Address:

[REDACTED ADDRESS]

FILED  
2012 APR 30 A 10:12  
NANDY SCHULTZ VOON  
COUNTY CLERK  
WILL COUNTY, ILLINOIS

## GENERAL DIRECTIONS

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Business Entity

Instrument of Ownership

Position of Management

NA

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Name

Address

Type of Practice

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Call me Sales Executive

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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 aggregate in excess of \$500, was received during the preceding calendar year:

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Signature of Person Making Statement

Date

4-30-12

# Statement of Economic Interests to be Filed with the County Clerk

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

Name: William M. Mayea

candidate Dupage Township Supervisor  
Each Office or Position of Employment for which this Statement is Filed:

Full Post Office Address:

## GENERAL DIRECTIONS

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Business Entity	Instrument of Ownership	Position of Management
<u>NA</u>		

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Dodge Township Supervisor

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:

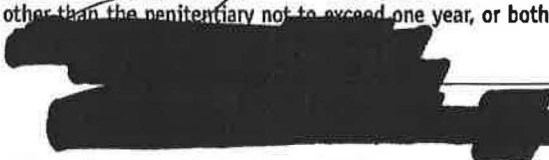
Dodge Township Supervisor

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:

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 12-4-2012  
Date

**Statement of Economic Interests to be Filed with the County Clerk**  
**Your Name Was Submitted For Filing by an Entity That You Represent**  
(Type or Print)

Name: **William M. Mayer**

Each Office or Position of Employment for which this Statement is Filed:  
**DuPage Township - Elected Township Supervisor**

FILED  
2013 MAY - 1 A 10 20  
NANCY SCHULTZ VDOTS  
CLERK  
JANUARY, ILLINOIS



130006529

Complete Residential Mailing Address:

[REDACTED ADDRESS]

**GENERAL DIRECTIONS**

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Name	Address	Type of Practice
<i>NA</i>		

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:

*NA*

4. List 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:

NA

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:

NA

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.)

Cell One Sales

NA Executive

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:

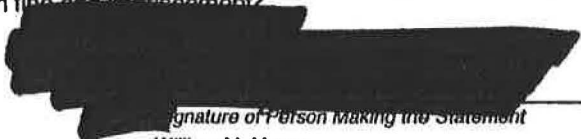
NA

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:

NA

#### 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 this Statement  
William M. Mayer

5-1-13  
Date



**Statement of Economic Interests to be Filed with the County Clerk**  
**Your Name Was Submitted For Filing by an Entity That You Represent**  
(Type or Print)

Name: **William "Bill" M. Mayer**

Each Office or Position of Employment for which this Statement is Filed:

**DuPage Township - Supervisor**

FILED  
2014 APR 23 A 11:23  
JANIS SCHULTZ VOOTIS  
COUNTY CLERK  
WILL COOK COUNTY, ILLINOIS



140010299

Complete Residential Mailing Address:

[REDACTED ADDRESS]

**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.

**Business Entity**

**Instrument of Ownership**

**Position of Management**

*Wrangler Unlimited*

*Shareholder*

*NA*

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**

*NA*

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:

*NA*

4. List 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.

NA

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.

NA

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.)

Wright Unlimited

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:

NA

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.

NA

#### 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  
William "Bill" M. Mayer

4-23-14  
Date

Each Office or Position of Employment for which this Statement is Filed:

DuPage Township - Supervisor

DO NOT DETACH  
(WILL BE RETURNED AS YOUR RECEIPT)

FILED  
2014 APR 23 A 11:23  
NANCY SCHULTZ VODTS  
COUNTY CLERK  
WILL COUNTY, ILLINOIS

**Statement of Economic Interests to be Filed with the County Clerk**  
**Your Name Was Submitted For Filing by an Entity That You Represent**  
(Type or Print)

Name: **William "Bill" M. Mayer**

Each Office or Position of Employment for which this Statement is Filed:

**DuPage Township - Supervisor**



Complete Residential Mailing Address:

[REDACTED ADDRESS]

**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.

Business Entity	Instrument of Ownership	Position of Management
<i>Wangler</i>	<i>partnership</i>	<i>partner</i>
_____	_____	_____
_____	_____	_____

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
<i>NA</i>	_____	_____
_____	_____	_____
_____	_____	_____

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:

*NA*

4. List 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:

NA

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:

NA

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.)

NA

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:

NA

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:

NA

#### 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  
William "Bill" M. Maver

5-11-15  
Date

**Statement of Economic Interests to be Filed with the County Clerk**  
**Your Name Was Submitted For Filing by an Entity That You Represent**  
(Type or Print)

Name **William "Bill" M. Mayer**

Each Office or Position of Employment for which this Statement is Filed

**DuPage Township - Supervisor**



160018182

Complete Residential Mailing Address

[Redacted Address]

**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.

Business Entity	Instrument of Ownership	Position of Management
<i>Wrightson</i>	<i>Partnership</i>	<i>Co-Owner partner</i>
_____	_____	_____
_____	_____	_____

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
<i>RA</i>	_____	_____
_____	_____	_____
_____	_____	_____

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:

*RA*

4. List 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:

NA

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:

NA

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 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:

NA

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:

NA

#### 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

William "Bill" M. Meyer

Date

4-30-16

**Your Name Was Submitted For Filing by an Entity That You Represent**

**STATEMENT OF ECONOMIC INTERESTS TO BE FILED WITH THE COUNTY CLERK**

(Type or Hand Print)

Name William M "Bill" Mayen

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

Candidate for: Supervisor (DUPAGE TOWNSHIP)

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.

Business Entity	Instrument of Ownership	Position of Management
<u>Wrangler</u>	<u>partnership</u>	<u>co-owner partner</u>

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
<u>NA</u>		

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.

NA

FILED  
2006 DEC -8 PM 2:15  
JANET SCHULTZ VODTS  
COUNTY CLERK  
WILL COUNTY, ILLINOIS



4. List 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.

NA

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 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.

NA

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.

NA

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.

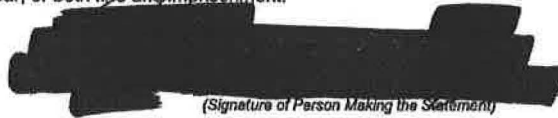
NA

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.

NA

#### 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)

12-6-16

(Date)

**Statement of Economic Interests to be Filed with the County Clerk**  
**Your Name Was Submitted For Filing by an Entity That You Represent**  
(Type or Print)

Name: **William "Bill" M. Mayer - 2793**

Each Office or Position of Employment for which this Statement is Filed:  
**DuPage Township - Supervisor**

2007 APR 27 PM 1:59  
NANCY SCHULTZ VDOT  
COUNTY CLERK  
WILL COUNTY, ILLINOIS

**FILED**



170021523

Complete Residential Mailing Address:

[REDACTED ADDRESS]

**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.

Business Entity	Instrument of Ownership	Position of Management
<i>Wragler</i>	<i>Partnership</i>	<i>co owner partner</i>
_____	_____	_____
_____	_____	_____

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
<i>NA</i>	_____	_____
_____	_____	_____
_____	_____	_____

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:

\_\_\_\_\_  
\_\_\_\_\_

4. List 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:

NA

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:

NA

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 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:

NA

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:

NA

#### 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  
William "Bill" M. Mayer - 2793

Date

4-27-17

*\* This Statement was filed with the County Clerk's office on a paper form. In order to provide the data in a manner accessible on the web, the information from the form has been transcribed for online display. While the Clerk's office has made a good faith effort to assure accuracy and completeness, illegible or ambiguous writing may lead to transcription errors. The original paper form is available for inspection at the Clerk's office.*



## Statement of Economic Interests

Filed with the Will County Clerk  
www.thewillcountyclerk.com  
(815) 740-4628

MAYER, WILLIAM "BILL"

Filing Date: 4/17/2018 7:00:00 PM

### Your Agency

Code	Agency	Title
DUPATW	DUPAGE TOWNSHIP	SUPERVISOR

### Your Answers

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 \$5,000.00 fair market value or from which dividends in excess of \$1,200.00 were received 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 in a financial institution, nor any debt instrument shall be listed.

**ANSWER:** Business Entity: Business Business Name: WRANGLER Instrument of Ownership: Partnership Position Of Management: Partner Unit of Government: DUPAGE TOWNSHIP

2. List the name, address and type of practice of any professional organization in which the person making the statement was an office, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of \$1,200.00 was derived during the preceding year.

**ANSWER:** N/A

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 file) and the nature of the entity to which they were rendered if fees exceeding \$5,000.00 were received during the preceding calendar year from the entity for professional services rendered by the person making the statement. ("Professional services" means services rendered in the practice of law, accounting, engineering, medicine, architecture, dentistry, or clinical psychology.)

**ANSWER:** N/A

4. List the identity (including the address or legal description of real estate) of any capital asset from which a gain of \$5,000.00 or more was realized during the preceding calendar year.

**ANSWER:** N/A

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 or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of \$5,000.00 fair market value at the time of filing or if income or dividends in excess of \$1,200.00 were received by the person filing from the entity during the preceding calendar year.

**ANSWER:** N/A

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 \$1,200.00 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.

**ANSWER:** N/A

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.

**ANSWER:** N/A

8. List the names 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.

**ANSWER:** N/A