

**KAREN KINNEY
ROCK ISLAND COUNTY CLERK**

Statement of Economic Interests

Your name was submitted for filing by an Entity that you represent.

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. Print or type.

Name

Street address

City, St ZIP

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

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 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
_____	_____	_____
_____	_____	_____
_____	_____	_____

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 \$1,200.00 was derived during the preceding calendar year:

Business Entity	Instrument of Ownership	Position of Management
_____	_____	_____
_____	_____	_____
_____	_____	_____

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 which income exceeding \$5,000.00 was received for professional services rendered during the preceding calendar year by the person making the statement:

(COMPLETE BUT DO NOT DETACH)

This section will be returned to you when the Statement is filed with the Rock Island County Clerk's Office.

Office or position of employment for which this statement is filed:

*Receipt is hereby acknowledged of your Statement
Economic Interests, filed pursuant to the Illinois
Governmental Ethics Act. The statement was filed on
this date:*

Name

Address

City, State ZIP

4. List the identity (including address or legal description of real estate) of any capital asset from which a capital gain of \$5,000.00 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 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 \$5,000.00 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:

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.)

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:

8. List the name of any entity from which a gift of gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of \$500.00, 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 \$1,000.00, 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

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