STATEMENT OF ECONOMIC INTERESTS

TO BE FILED WITH

JERSEY COUNTY CLERK PAM WARFORD 200 N. LAFAYETTE ST, JERSEYVILLE, IL 62052

Name and Complete Address (Type or Print Legibly):



	List each office or position	on for which this statement is filed:			
		GENERAL DIRECTION	us		
be th		erson making the statement. Campaign r) of a spouse or any other party shall be considered to eceipts shall not be included in this statement. If more		
ř r	person is required to file, in wh market value, or from which di estate, location thereof shall be	ich the ownership interest held by the per vidends in excess of \$1,200 were received	with a unit of local government in relation to which the rson at the date of filing is in excess of \$5,000 fair during the preceding calendar year: (In the case of rea, then by legal description.) No time or demand deposit		
Busir	ness Entity	Instrument of Ownership	Position of Management		
(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:				
Nam	e 	Address	Type of Practice		
F	person is required to file) to ea	•	or units of local government in relation to which the 5,000 was received for professional services rendered		

4.	List the identity (including address or legal description of real estate) of any capital asset from which a capital gain of \$5,000 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 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 local unit of 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:		
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:		
me the	VERIFICATION eclare that this Statement of Economic Interests (including any accompanying scheduled and statements) has been examined by and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by allinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine to exceed \$1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and prisonment.		
File	Signature of Person Making Statement Date and with the County Clerk:		
1110	,a with the county cicik.		