

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

The Cook County Code of Ordinances (§2-610 *et seq.*) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing.

If you are asked to list names, but there are no applicable names to list, you must state NONE. An incomplete Statement will be returned and any action regarding this contract will be delayed. A failure to fully comply with the ordinance may result in the action taken by the County Board or County Agency being voided.

"Applicant" means any Entity or person making an application to the County for any County Action.

"County Action" means any action by a County Agency, a County Department, or the County Board regarding an ordinance or ordinance amendment, a County Board approval, or other County agency approval, with respect to contracts, leases, or sale or purchase of real estate.

"Person" "Entity" or "Legal Entity" means a sole proprietorship, corporation, partnership, association, business trust, estate, two or more persons having a joint or common interest, trustee of a land trust, other commercial or legal entity or any beneficiary or beneficiaries thereof.

This Disclosure of Ownership Interest Statement must be submitted by :

1. An Applicant for County Action and
2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under **Ownership Interest Declaration**.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the Applicant or Stock/Beneficial Interest Holder

This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name CPS Chicago Parking, LLC

D/B/A: _____ FEIN NO.: 62-0789510

Street Address: 200 East Randolph, Suite 5475

City: Chicago State: IL Zip Code: 60601

Phone No.: 312-274-2110 Fax Number: 312-640-6160 Email: pmccue@spplus.com

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

Business Trust Estate Association Joint Venture

Other (describe) Limited Liability Company

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Central Parking System, Inc.	507 Mainstream Drive, Nashville, TN 37228	70%
Gomez Transportation, LLC	230 W. Monroe St., Suite 340, Chicago, IL 60606	30%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
N/A		

3. Is the Applicant constructively controlled by another person or Legal Entity? [] Yes [] No
 If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
James F. Buczek	200 E. Randolph, Suite 5475, Chicago, IL 60601	Chairman & President	N/A
Patrick J. McCue	200 E. Randolph, Suite 5475, Chicago, IL 60601	Secretary	N/A
Armando Gomez	230 W. Monroe, Suite 340, Chicago, IL 60606	Vice Chairman	N/A

Declaration (check the applicable box):

- I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

James F. Buczek

Chairman & President

Name of Authorized Applicant/Holder Representative (please print or type)

Title

James F. Buczek

7/14/16

Signature

Date

jbuczek@spplus.com

312-274-2025

E-mail address

Phone Number

Subscribed to and sworn before me
this 14 day of July, 2016

My commission expires: 04/14/18

x *Melody Eckert*
Notary Public Signature

Notary Seal



COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

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This Disclosure of Ownership Interest Statement must be submitted by :
1. An Applicant for County Action and
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This Statement is being made by the [X] Applicant or [] Stock/Beneficial Interest Holder
This Statement is an: [] Original Statement or [] Amended Statement

Identifying Information:

Name Atlas & Associates Inc
D/B/A Atlas & Associates Inc FEIN NO.: 39-1423257
Street Address: 4907 Sunset Lane
City: Country Club Hills State: IL Zip Code: 60478
Phone No.: 708 215-4097 Fax Number: 708-798-4328 Email: atlasapprec1@yahoo.com

Cook County Business Registration Number:
(Sole Proprietor, Joint Venture Partnership)
Corporate File Number (if applicable):

Form of Legal Entity:

[] Sole Proprietor [] Partnership [X] Corporation [] Trustee of Land Trust
[] Business Trust [] Estate [] Association [] Joint Venture
[] Other (describe)

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Table with 3 columns: Name, Address, Percentage Interest in Applicant/Holder. Rows include Shelia Swan and Saffter Swan with their respective addresses and 50% ownership percentages.

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
N/A		

3. Is the Applicant constructively controlled by another person or Legal Entity? [] Yes [X] No
 If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
N/A			

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Shelia Swan	4907 Sunset Ln	CO-THINK IT 100178 President	nturs
Sentley Swan	4907 Sunset Ln	CO-THINK IT 100178	

Declaration (check the applicable box):

- I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

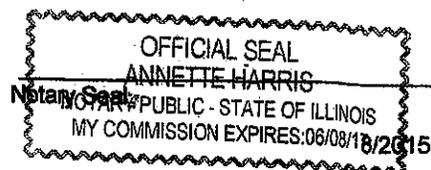
Shelia Swan
 Name of Authorized Applicant/Holder Representative (please print or type)
Shelia Swan
 Signature
trasefdress1@yahoo.com
 E-mail address

President
 Title
5/21/2016
 Date
708-525-4097
 Phone Number

Subscribed to and sworn before me this 27th day of May 2016

x Annette Harris
 Notary Public Signature

My commission expires: 06-08-2017



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This Statement is being made by the Applicant or Stock/Beneficial Interest Holder

This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name First Commonwealth, Inc. ("FCW, Inc."), a wholly owned subsidiary of The Guardian Life Insurance Company of America ("Guardian")

D/B/A: _____ FEIN NO.: 75-215228

Street Address: 550 W. Jackson Blvd., Suite 750

City: Chicago State: Illinois Zip Code: 60661

Phone No.: 800-933-3136 Fax Number: _____ Email: _____

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

Business Trust Estate Association Joint Venture

Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
The Guardian Life Insurance Company of America ("Guardian")		100%
7 Hanover Square		
New York, NY 10004		

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
N/A		

3. Is the Applicant constructively controlled by another person or Legal Entity? [] Yes [] No
 If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
N/A			

Corporate Officers, Members and Partners Information:

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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
SEE ATTACHED			

Declaration (check the applicable box):

- I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Stuart J. Shaw, on behalf of FCW, Inc., a wholly owned subsidiary of Guardian
Name of Authorized Applicant/Holder Representative (please print or type)

Vice President
Title

Dj Shaw
Signature

8/9/16
Date

stu_shaw@glic.com
E-mail address

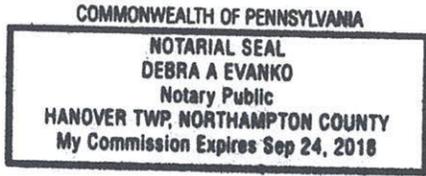
610-807-8222
Phone Number

Subscribed to and sworn before me
this 9th day of August 2016

My commission expires: 9/24/18

X Debra A Evanko
Notary Public Signature

Notary Seal



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This Statement is being made by the Applicant or Stock/Beneficial Interest Holder

This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name Clarity Partners, LLC

D/B/A: n/a

FEIN NO.: 80-0123899

Street Address: 20 N Clark St, Suite 3600

City: Chicago

State: IL

Zip Code: 60602

Phone No.: 312-920-0550

Fax Number: 312-920-0551

Email: d.namkung@claritypartners.com

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): 01141198

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

Business Trust Estate Association Joint Venture

Other (describe) Limited Liability Company

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
David C. Namkung	20 N Clark St. STE 3600, Chicago, IL 60602	51%
Rodney S. Zech	20 N Clark St. STE 3600, Chicago, IL 60602	49%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
n/a		

3. Is the Applicant constructively controlled by another person or Legal Entity? [] Yes [**X**] No
 If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
David C. Namkung;	20 N Clark St. STE 3600, Chicago, IL 60602;	Managing Member	
Rodney S. Zech;	20 N Clark St. STE 3600, Chicago, IL 60602;	Managing Member	

Declaration (check the applicable box):

- [**X**] I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- [] I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

David C. Namkung

Name of Authorized Applicant/Holder Representative (please print or type)

Signature

d.namkung@claritypartners.com

E-mail address

Subscribed to and sworn before me
this 19th day of August 20 16

X

L. Krupecki
Notary Public Signature

Managing Member

Title

Date

(312) 920-0550

Phone Number

My commission expires:

7/30/2019

Notary Seal



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This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name GARLAND/DBS, INC.

D/B/A: _____

FEIN NO.: 80-0525452

Street Address: 3800 EAST 91st STREET

City: CLEVELAND

State: OH

Zip Code: 44105

Phone No.: 216-641-7500

Fax Number: 216-883-2055

Email: Hdobson@GARLANDinc.com

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

Business Trust Estate Association Joint Venture

Other (describe) _____

Ownership Interest Declaration:

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 If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
GARLAND INDUSTRIES, INC.	3800 EAST 91 ST STREET CLEVELAND, OHIO 44105	100%	PARENT/HOLDING

Corporate Officers, Members and Partners Information:

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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
David Sokol	Cleveland, OH	President	20
Joe Orlando	Cleveland, OH	VP	20
Dill Oley	Cleveland, OH	Treasurer	25

Declaration (check the applicable box):

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COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

FRANK A. PERCACCIANTE
Name of Authorized Applicant/Holder/Representative (please print or type)

[Signature]
Signature

FPERCACCIANTE@GARLANDIND.COM
E-mail address

Controller
Title

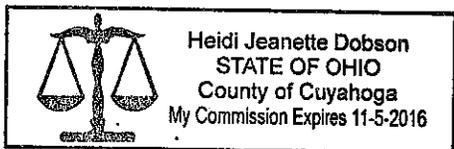
June 13, 2016
Date

216.430.3693
Phone Number

Subscribed to and sworn before me
this 13 day of 6, 2016

My commission expires: 11-5-2016

X [Signature]
Notary Public Signature



COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

1556-15033

The Cook County Code of Ordinances (§2-610 *et seq.*) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing.

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This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name Pagoda Electric & Construction, Inc.
 D/B/A: _____ FEIN NO.: 36-4124778
 Street Address: 1728 Cornell Road
 City: Flossmoor State: IL Zip Code: 60422
 Phone No.: 708-263-9540 Fax Number: 708-647-6368 Email: smills@pagodaelectric.com

Cook County Business Registration Number: _____
 (Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

- Sole Proprietor Partnership Corporation Trustee of Land Trust
- Business Trust Estate Association Joint Venture
- Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Pagoda Electric & Construction, Inc.	1728 Cornell Rd, Flossmoor, IL 60422	100%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address

3. Is the Applicant constructively controlled by another person or Legal Entity? Yes No
 If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship

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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Dr. Vincent Mills	1728 Cornell Rd, Flossmoor, IL 60422	President	19 years

Declaration (check the applicable box):

- I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Dr. Vincent Mills
Name of Authorized Applicant/Holder Representative (please print or type)

Dr. Vincent Mills
Signature

smills@pagodaelectric.com
E-mail address

President
Title

12/15/18
Date

708-263-9540
Phone Number

Subscribed to and sworn before me
this 18th day of Dec. 2015

X *Roseann Turnquist*
Notary Public Signature

My commission expires: 08-09-2019



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"County Action" means any action by a County Agency, a County Department, or the County Board regarding an ordinance or ordinance amendment, a County Board approval, or other County agency approval, with respect to contracts, leases, or sale or purchase of real estate.

"Person" "Entity" or "Legal Entity" means a sole proprietorship, corporation, partnership, association, business trust, estate, two or more persons having a joint or common interest, trustee of a land trust, other commercial or legal entity or any beneficiary or beneficiaries thereof.

This Disclosure of Ownership Interest Statement must be submitted by :

- 1. An Applicant for County Action and
2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under Ownership Interest Declaration.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the [X] Applicant or [] Stock/Beneficial Interest Holder

This Statement is an: [X] Original Statement or [] Amended Statement

Identifying Information:

Name Hyland Software, Inc.

D/B/A: N/A FEIN NO.: 34-1699247

Street Address: 28500 Clemens Road

City: Westlake State: Ohio Zip Code: 44145

Phone No.: 440-788-5000 Fax Number: 440-788-5100 Email: hylandcontracts@onbase.com

Cook County Business Registration Number: (Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable):

Form of Legal Entity:

[] Sole Proprietor [] Partnership [X] Corporation [] Trustee of Land Trust

[] Business Trust [] Estate [] Association [] Joint Venture

[] Other (describe)

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
HSI Holdings II, Inc	28500 Clemens Rd. Westlake OH 44145	100%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address

3. Is the Applicant constructively controlled by another person or Legal Entity? [] Yes [] No
 If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
William Priemer	28500 Clemens Rd	President & CEO	19 Years
Christopher Hyland	Westlake, OH 44145	Executive Vice President & Chief Financial Officer	24 Years

Declaration (check the applicable box):

- [] I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- [] I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

CONTRACT NO.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

W.A. Priemer
Name of Authorized Applicant/Holder Representative (please print or type)

CEO
Title

[Signature]
Signature

8/26/16
Date

bill.priemer@ohbase.com
E-mail address

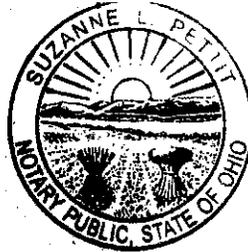
(440) 788-5000
Phone Number

Subscribed to and sworn before me
this 26 day of August 2016

My commission expires:

X [Signature]
Notary Public Signature

April 25, 2017
Notary Seal



SUZANNE L. PETTIT
NOTARY PUBLIC
STATE OF OHIO
RECORDED IN
LORAIN COUNTY
My Commission Expires
April 25, 2017