

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.

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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 Applicant or Stock/Beneficial Interest Holder
 This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name Carl Alaimo
 D/B/A: _____ FEIN NO.: 26-3023672
 Street Address: 914 Helen Crive
 City: Melrose Park State: Illinois Zip Code: 60160
 Phone No.: 708-343-1554 Fax Number: _____ Email: jaildr@aol.com

Cook County Business Registration Number: _____
 (Sole Proprietor, Joint Venture Partnership)
 Corporate File Number (if applicable): 66206149

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
NONE		

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 **NONE** Name of Principal _____ Principal's Address _____

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 **NONE** 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
Carl Alaimo 914 Helen Drive Melrose Park, IL 60160 President for Life of comp.
Carl Alaimo 914 Helen Drive Melrose Park, IL 60160 Secretary for Life of comp.

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.

Carl Alaimo
Name of Authorized Applicant/Holder Representative (please print or type)
Carl Alaimo
Signature
jaildr@aol.com
E-mail address

President
Title
Date
708-372-5998
Phone Number

Subscribed to and sworn before me this **19th** day of **June**, 20**16**
Teri L. Cervone
Notary Public Signature

My commission expires: **10/26/19**



COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

CONTRACT NO. 1511-15074

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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 Michael J. Laird

D/B/A: Michael J. Laird, Ltd. FEIN NO.: 36-3648049

Street Address: 20 N. Clark Street, 30th Floor.

City: Chicago State: IL Zip Code: 60602

Phone No.: (312) 372-0500 Fax Number: (312) 372-0511 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
<u>Michael J. Laird</u>	<u>608 S. Walnut, Arlington Heights, IL 60005</u>	<u>100%</u>

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

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.

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

[Signature]
Signature

Kathy @ McCordle Sport @ com
E-mail address

President
Title

23 June 2016
Date

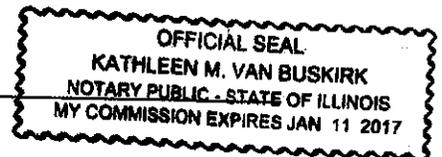
312 392-0500
Phone Number

Subscribed to and sworn before me this 23 day of June 2016

x [Signature]
Notary Public Signature

My commission expires:

Notary Seal



COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

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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 O'CONNOR LAW OFFICES, LLC

D/B/A: FEIN NO.: 20-4417117

Street Address: 10751 W. 165th ST. - SUITE 101

City: ORLAND PARK State: IL Zip Code: 60467

Phone No.: (708) 460-8888 Fax Number: (708) 460-8887 Email: dave@doconnorlawoffices.com

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

Corporate File Number (if applicable): IL SECRETARY OF STATE FILE # 01593919

Form of Legal Entity:

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

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

[X] 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
JAMES J. O'CONNOR 16839 SUSAN LANE, ORLAND PARK, IL 60467 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
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			

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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
LIMITED LIABILITY COMPANY: O'CONNOR LAW OFFICES, LLC			
DAVID J. O'CONNOR	16839 SUSAN LANE ORLAND PARK, IL 60467	MANAGING MEMBER	INDEFINITE

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.

DAVID J. O'CONNOR
Name of Authorized Applicant/Holder Representative (please print or type)

David J. O'Connor
Signature

dave@doconnorlawoffices.com
E-mail address

MANAGING MEMBER
Title

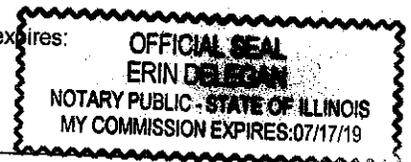
6/20/16
Date

(908) 460-8888
Phone Number

Subscribed to and sworn before me
this 20th day of JUNE, 2016

x Erin DeLeon
Notary Public Signature

My commission expires:



Notary Seal

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

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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: Robert J. Hovey
D/B/A: Robert J Hovey Law Office FEIN NO.: 326 86 7199
Street Address: 10715 S. WASHINGTON
City: CHICAGO State: IL Zip Code: 60655
Phone No.: 773 977 6787 Fax Number: 773 365-5179 Email: hovey@law.com www.wj.com

Cook County Business Registration Number: Sole Proprietorship

Corporate File Number (if applicable):

Form of Legal Entity:

- [X] 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: Robert J. Hovey Address: 10715 S. WASHINGTON CHGO IL 60655 Percentage Interest in Applicant/Holder: 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
<u>None</u>		

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
<u>None</u>			

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
<u>None</u>			

Declaration (check the applicable box):

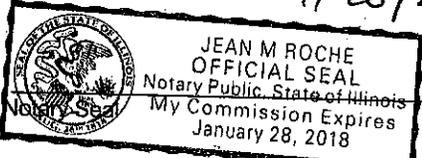
I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.

I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

Robert J. Hovey
 Name of Authorized Applicant/Holder Representative (please print or type)
Robert J. Hovey
 Signature
hoveylaw@wowway.com
 E-mail address

SOLE PROPRIETOR
 Title
4/28/16
 Date
773 977 6787
 Phone Number

Subscribed to and sworn before me
 this 28 day of June 2016
 x Jean M Roche
 Notary Public Signature

My commission expires: 1/28/2018


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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 Dennis Des Deer Rehabilitation Services Inc

D/B/A: _____ FEIN NO.: 201529415

Street Address: 3510 W. Arthurs Ln

City: Chicago State: IL Zip Code: 60624

Phone No.: 773-826-0397 Fax Number: 773-826-0397 Email: drdeer@gmail.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
<u>Dennis Des.</u>	<u>3510 W. Arthurs Ln</u>	<u>100%</u>

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
Dennis Dea	N/A	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.

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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
Dennis Dea	3510 W. Anthony	President	Indefinite

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.

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

Dennis Dea
Signature

drdeera@gmail.com
E-mail address

President
Title

6/23/14
Date

Phone Number

Subscribed to and sworn before me this 21st day of Aug, 2014

X *Eric J Lindsay*
Notary Public Signature

My commission expires:

Notary Seal



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This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name Meade, Inc.

D/B/A: _____ FEIN NO.: 27-4060761

Street Address: 6850 W. 62nd Street

City: Chicago State: IL Zip Code: 60638

Phone No.: 708-588-2594 Fax Number: 708-588-6228 Email: mkk@meade100.com

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

Corporate File Number (if applicable): 70129892

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
L & H Company, Inc.	2215 York Rd., Ste 304, Oakbrook, IL 60523	100% (parent company)

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This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name L & H Co., Inc. - parent company

D/B/A: _____ FEIN NO.: 36-3097857

Street Address: 2215 York Rd., Suite 304, Oakbrook, IL 60523

City: Oakbrook State: IL Zip Code: 60523

Phone No.: 708-588-2543 Fax Number: 708-588-6228 Email: dal@meade100.com

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

Corporate File Number (if applicable): F6060-183-6

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
Bonita L. Hay	2215 York Rd., Ste 304, Oakbrook, IL 60523	6.08%
Nicole L. Lizzadro Kelley	2215 York Rd., Ste 304, Oakbrook, IL 60523	7.99%
Anthony C. Lizzadro	2215 York Rd., Ste 304, Oakbrook, IL 60523	5.33
John S. Lizzadro, Jr.	2215 York Rd., Ste 304, Oakbrook, IL 60523	5.96
Louis L. Lizzadro	2215 York Rd., Ste 304, Oakbrook, IL 60523	6.22

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"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: Envelope Connection

D/B/A:

FEIN NO.: 36-3634739

Street Address: 5660 N. Elston Ave

City: Chicago

State: IL

Zip Code: 60646

Phone No.: 773-774-4600

Fax Number: 773-774-4601

Email: envelope@interaccess.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

Jasmine Rasso 5921 N. Drake

100%

Chicago, IL 60659

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
Jasmine Russo	5921 N. Drake Chicago	President	1989 - Present
Andrew Calvimantas	5908 N Drake Chicago	Secretary	1990 - Present

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.

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

Jasmine Russo
Signature

envelope@interaccess.com
E-mail address

President
Title

9-9-16
Date

773-774-4600
Phone Number

My commission expires: 01-12-20

Subscribed to and sworn before me this 9 day of Sept 2016

X Brian Strandquist
Notary Public Signature



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.

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This Disclosure of Ownership Interest Statement must be submitted by :

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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: COSTAL BEACH INFORMATION, INC

D/B/A: _____ FEIN NO.: 52-2134617

Street Address: 1331 L STREET NW, WASHINGTON, DC

City: _____ State: _____ Zip Code: 20005

Phone No.: _____ 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) _____

D. DELINQUENCY IN PAYMENT OF TAXES

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant is not an owner or a party responsible for the payment of any tax or fee administered by Cook County, by a local municipality, or by the Illinois Department of Revenue, which such tax or fee is delinquent, such as her award of a contract or subcontract pursuant to the Code, Chapter 34, Section 34-171.

E. HUMAN RIGHTS ORDINANCE

No person who is a party to a contract with Cook County ("County") shall engage in unlawful discrimination or sexual harassment against any individual in the terms or conditions of employment, credit, public accommodations, housing, or provision of County facilities, services or programs (Code Chapter 42, Section 42-30 et seq.).

F. ILLINOIS HUMAN RIGHTS ACT

THE APPLICANT HEREBY CERTIFIES THAT: It is in compliance with the Illinois Human Rights Act (775 ILCS 5/2-105), and agrees to abide by the requirements of the Act as part of its contractual obligations.

G. INSPECTOR GENERAL (COOK COUNTY CODE, CHAPTER 34, SECTION 34-174 and Section 34-250)

The Applicant has not willfully failed to cooperate in an investigation by the Cook County Independent Inspector General or to report to the Independent Inspector General any and all information concerning conduct which they know to involve corruption, or other criminal activity, by another county employee or official, which concerns his or her office of employment or County related transaction.

The Applicant has reported directly and without any undue delay any suspected or known fraudulent activity in the County's Procurement process to the Office of the Cook County Inspector General.

H. CAMPAIGN CONTRIBUTIONS (COOK COUNTY CODE, CHAPTER 2, SECTION 2-585)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning campaign contributions, which is codified at Chapter 2, Division 2, Subdivision II, Section 585, and can be read in its entirety at www.municode.com.

I. GIFT BAN, (COOK COUNTY CODE, CHAPTER 2, SECTION 2-574)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning receiving and soliciting gifts and favors, which is codified at Chapter 2, Division 2, Subdivision II, Section 574, and can be read in its entirety at www.municode.com.

J. LIVING WAGE ORDINANCE PREFERENCE (COOK COUNTY CODE, CHAPTER 34, SECTION 34-160)

Unless expressly waived by the Cook County Board of Commissioners, the Code requires that a living wage must be paid to individuals employed by a Contractor which has a County Contract and by all subcontractors of such Contractor under a County Contract, throughout the duration of such County Contract. The amount of such living wage is annually by the Chief Financial Officer of the County, and shall be posted on the Chief Procurement Officer's website.

The term "Contract" as used in Section 4, I, of this EDS, specifically excludes contracts with the following:

- 1) Not-For Profit Organizations (defined as a corporation having tax exempt status under Section 501(C)(3) of the United States Internal Revenue Code and recognized under the Illinois State not-for-profit law);
- 2) Community Development Block Grants;
- 3) Cook County Works Department;
- 4) Sheriff's Work Alternative Program; and
- 5) Department of Correction inmates.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

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

[Signature]
 Signature

jeancoleman@att.net
 E-mail address

General Counsel
 Title

4/29/2016
 Date

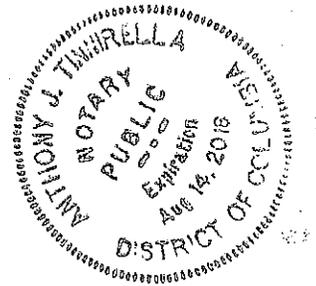
708-346-6500
 Phone Number

Subscribed to and sworn before me
 this 28th day of June, 2016.

X [Signature]
 Notary Public Signature

My commission expires:

Notary Seal



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.

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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 Gimmel Solutions / Prodiagio LLC
D/B/A: _____ FEIN NO.: 47-3567442
Street Address: 24 Greenway Plaza, Suite 1000
City: Houston State: TX Zip Code: 77046
Phone No.: 713 5866500 Fax Number: 713 5866501 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) LLC

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
Michael Alsup	24 Greenway Plaza Houston, Tx 77046	42%

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

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

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

Danae Stephenson
Signature

Danae.Stephenson@Gimmel.Com
E-mail address

Vice President
Title

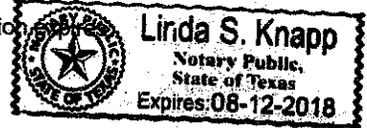
8-2-16
Date

7135866500
Phone Number

Subscribed to and sworn before me
this 2 day of Aug, 2016.

x Linda Knapp
Notary Public Signature

My commission



Notary Seal

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

Microsoft Corporation

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 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 Microsoft Corporation

D/B/A: _____ FEIN NO.: 91-1144442

Street Address: One Microsoft Way

City: Redmond State: WA Zip Code: 98052-6399

Phone No.: (703) 673-7871 Fax Number: (425) 708-0482 Email: dgallagh@microsoft.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
None.		

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
NA		

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
NA			

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
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, to the best of the undersigned's knowledge and belief.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

David T. Gallagher

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

David T. Gallagher
Signature

dgallagh@microsoft.com
E-mail address

Director of Contracts

Title

October 24, 2016
Date

(703) 673-7871
Phone Number

Subscribed to and sworn before me
this 24 day of 10, 2016

My commission expires: 10-31-2020

x Melissa Ranslem
Notary Public Signature

Notary Seal



COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

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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 MIKE B. FARSHCHI

D/B/A: CAPITOL CEMENT COMPANY, INC.

FEIN NO.: 36-0869820

Street Address: 6231 NORTH PULASKI ROAD

City: CHICAGO

State: ILLINOIS

Zip Code: 60646

Phone No.: 773-478-2200

Fax Number: 773-478-4646

Email: mike@capitolcementco.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) _____

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

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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 DAVID SLONIM

D/B/A: CAPITOL CEMENT COMPANY, INC. FEIN NO.: 36-0869820

Street Address: 6231 NORTH PULASKI ROAD

City: CHICAGO State: ILLINOIS Zip Code: 60646

Phone No.: 773-478-2200 Fax Number: 773-478-4646 Email: david@capitolcementco.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
MIKE B. FARSHCHI	6231 NORTH PULASKI ROAD CHICAGO, IL 60646	75%
DAVID SLONIM	6231 NORTH PULASKI ROAD CHICAGO, IL 60646	25%

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 [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

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.

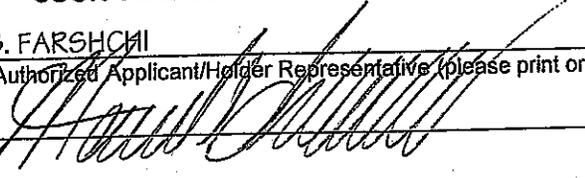
Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
MIKE B. FARSHCHI	6231 N. PULASKI RD. CHICAGO, IL 60646	PRESIDENT	N/A
DAN MELNYK	6231 N. PULASKI RD. CHICAGO, IL 60646	VICE PRESIDENT	N/A
DAVID SLONIM	6231 N. PULASKI RD. CHICAGO, IL 60646	VICE PRESIDENT	N/A

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.

CONTRACT NO.
1685-15592

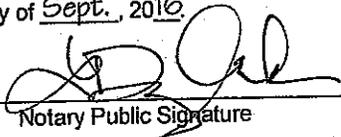
COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

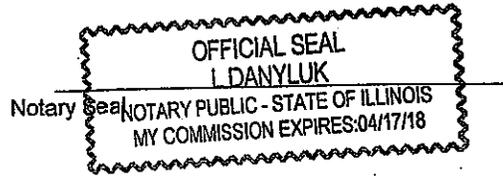
MIKE B. FARSHCHI
Name of Authorized Applicant/Holder Representative (please print or type)

Signature
mike@capitolcementco.com
E-mail address

PRESIDENT
Title
9/6/2016
Date
773-478-2200
Phone Number

My commission expires: 4/17/2018

Subscribed to and sworn before me
this 6th day of Sept., 2016.

X 
Notary Public Signature



COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

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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 WRIGHT AUTOMOTIVE INC

D/B/A: _____

FEIN NO.: 37.0924576

Street Address: 11159 IL RT 185 PO BOX 279

City: HILLSBORO

State: IL

Zip Code: 62049

Phone No.: 217-827-4245

Fax Number: 217-608-2111

Email: rcruse@wrightautomotive.com

Cook County Business Registration Number: 1623-15712

(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): 49836597

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
BECKY WRIGHT	10 OLD OAKS DR HILLSBORO IL 62049	90 %
ANDREW WRIGHT	9673 WILDWOOD LANE CHATHAM IL 62629	10%

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:

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
ANDREW WRIGHT		PRESIDENT	
AIMEE L SHELTON		SECRETARY	

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

ANDREW WRIGHT

PRESIDENT

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

Title

[Handwritten Signature]

09/13/2016

Signature

Date

AWRIGHT@wrightautomotive.com

217-827-4245

E-mail address

Phone Number

Subscribed to and sworn before me
this 13 day of 09, 2016

My commission expires



X *[Handwritten Signature]*

Notary Public Signature

Notary Seal