

## AMENDMENT NO. 2

This Amendment modifies Contract No. 2038-18543, for Architectural and Engineering Services for the Public Safety Portfolio for Countywide Courthouse ADA Comprehensive Assessment, Group 2 at Maywood, Rolling Meadows and Skokie Courthouses – Target Market by and between the County of Cook, Illinois, herein referred to as “County” and RADA Architects, Ltd., authorized to do business in the State of Illinois hereinafter referred to as “Contractor”:

### RECITALS

Whereas, the County and Contractor have entered into a Contract approved by the County Board on October 19, 2023, (hereinafter referred to as the “Contract”), wherein the Contractor is to provide Architectural and Engineering Services for the Public Safety Portfolio for Countywide Courthouse ADA Comprehensive Assessment, Group 2 at Maywood, Rolling Meadows and Skokie Courthouses – Target Market, (hereinafter referred to as the “Services”) from November 1, 2023, through October 31, 2024, in an amount not to exceed \$370,071.82, with one (1), one (1) renewal option; and

Whereas, Amendment No. 1 was executed by the Chief Procurement Officer on August 6, 2024, to renew the contract for one (1) year beginning November 1, 2024 through October 31, 2025; and

Whereas, the Contract will expire October 31, 2025, and the agreed upon Services are still required; and

Whereas, an increase of the Contract amount is required for the continuation of Services; and pursuant to Article 10 Section C of the Contract, the County and Contractor desire to increase the Contract in the amount of \$156,104.71

Whereas, pursuant to Article 4 of the Contract, the County and Contractor desire to extend the Contract for six months beginning on November 1, 2025, through April 30, 2026.

Whereas pursuant to Article 10 of the Contract, the County and Contractor desire to include additional scope of services to the Contract.

Now therefore, in consideration of mutual covenants contained herein, it is agreed by and between the parties to amend the Contract as follows:

1. This Contract is extended through April 30, 2026.
2. The Contract is increased by \$156,104.71 and the Total Contract Amount is revised to \$526,176.53.
3. The Contract is hereby amended to incorporate Attachment A and made part of the Contract.
4. The attached updated Identification of Sub-Contractors/Suppliers/Sub-Consultants Form (if applicable and updated), MBE/WBE Utilization Plan Forms (if applicable and updated), Certificate of Insurance (if updated), and Economic Disclosures Statement under Attachment B are incorporated and made part of the Contract.
5. All other terms and conditions remain as stated in the Contract.

In witness whereof and pursuant to authority of the Chief Procurement Officer the County and Contractor have caused this Amendment No. 2 to be executed on the date and year last written below.


County of Cook, Illinois

By: Raffi Sarrafian  
Chief Procurement Officer

Digitally signed by Raffi Sarrafian  
Date: 2025.09.22 11:02:46 -05'00'

Date: \_\_\_\_\_

RADA Architects, Ltd.

  
Signed

Radosveta Doytcheva  
Type or print name

By: \_\_\_\_\_  
State's Attorney (if applicable)

\_\_\_\_\_  
Type or print name (if applicable)

President  
Title

Date: \_\_\_\_\_

Date: 7/21/2025

**ATTACHMENT A**



## PROJECT SCOPE SUMMARY

Portfolio:

<b>Project EBS#</b>	29310
<b>Project Name:</b>	Domestic Violence Courthouse ADA Assessment
<b>Building ID Code:</b>	Domestic Violence Courthouse
<b>Location:</b>	555 W. Harrison Street, Chicago, IL

<b>Budget Funding Source :</b>	Capital Project	
<b>Project Group Name:</b>	CCP	
<b>Dept. of Capital Planning &amp; Policy CIP FY 25 Project Budget:</b>		\$150,000
<b>Dept. of Capital Planning &amp; Policy CIP FY 26-33 Project Budget:</b>		
<b>Dept. of Capital Planning &amp; Policy Budget Subtotal:</b>		\$150,000
<b>Initial Scope Total (from below):</b>		\$136,432
<b>Difference: (- Over) / + Under:</b>		\$13,568

<input type="checkbox"/> Project Field Meeting Conducted	No	<input type="checkbox"/> Checklist complete	No
<input checked="" type="checkbox"/> Need A/E Services		<input type="checkbox"/> Needs Furniture	

### PROJECT DESCRIPTION

*The courthouse is required to be accessible per federal, state and local law. An AE is needed to conduct an assessment to identify any barriers to accessibility the facility may have.*

### DETAILED SCOPE OF WORK

*On-site accessibility assessment to be completed by an AE firm. AE will develop Program Analysis Report and a Transfer Design Package that includes approximately 30% schematic design drawings. This scope of work to be accomplished via an amendment to an existing contract for the same scope of services at the outlying courthouses. The vendor LOE is similar to the original base contract LOE and came in under the LOE established by the County and its consulting team.*

### GENERAL

Complete assessment of Domestic Violence Courthouse matching the scope of work being completed at the outlying courthouses. Includes interior spaces and exterior parking and accessible pathways.

**PROJECT RESTRICTIONS & INFORMATION**

1	Space allocation Required?	No
2	Space allocation Submitted?	N/A
3	Space allocation Approved?	N/A
4	Delivery Method:	DESIGN-BID-BUILD
5	Describe any logistic constraints:	
6	Describe any schedule constraints:	Court and detainee space work to be done off-hours
7	Describe any working hours constraints:	
8	Describe any seasonal constraints:	N/A
9	Will the existing facility require any hazardous abatement?	N/A
10	Has a test for hazardous material been conducted ?	No
11	Is an immediate project start requested from the End User?	Yes
12	Will the scope of work require permits?	Yes
13	Who is the main contact for access into the facility?	Earl Jackson

PHOTOS OF PROPOSED PROJECT



Lobby



Lobby



Exterior



Typical Office

COMMENTS

(Additional work initiated by responses to the questions below, is not included in the DCPD Budget amount.)

1  
2

PROJECTED MILESTONE DATES (edit activities on a case-by-case basis)

DCPD Scope Sheet Approval	1/30/2025
(NEPO/TOAE/PSA) Request for Proposal	2/4/2025
Proposal Review / Negotiation	2/5/2025
Issue Purchase Order	4/1/2025
Badging (as required)	4/4/2025
Pre-Design & Assessment Report	7/1/2025
Design	9/1/2025
GC Request for Proposal (JOC)	
Joint Scope Meeting (JSM)	
Detailed Scope of Work submission (DSOW)	
OCPO NOPA Approval	
Issue Purchase Order	
Preconstruction Checklist, Permit Submission and Issuance	
Issuance of NTP to JOC Contractor	
Substantial Completion	

\*Days displayed in red font indicate weekend days

PROCESS ITEMS

Business Case Description	
<div>Business Case additional comments <i>(if required)</i></div>	
Rough Order of Magnitude (ROM) Budget	
Basic Services from LOE	\$135,982
Reimbursables	\$450
<div>TOTAL Projected budget:</div>	
	\$136,432
Facility Condition Assessment (FCA)	
<i>If required, please complete the FCI section below.</i>	
<div>Facility Condition Index (FCI)</div>	
Cost of maintenance, replacements, deficiencies	\$0.0
Current replacement cost	\$0.0
<div>DCPP Budget Comparison</div>	
FY <span>xx</span>	
FY <span>xx</span>	\$0
Conclusion: FY24 funds appear to be <i>sufficient/not sufficient</i> for this project	
	Sufficient
<div>Strategic Facilities Plan Outlook</div>	
	\$0
Data forthcoming:	
APPROVAL OF CONCURRENCE TO MOVE FORWARD INTO PROCUREMENT PHASE <i>(edit signatures case-by-case)</i>	
<div><div>Signed by:</div><div><div><div>09C75BDBF92947D</div><div>Signature of Business Unit Requestor</div></div><div><div>3/6/2025</div><div>Date</div></div></div></div>	
<div><div>DocuSigned by:</div><div><div><div>303A4D7900E3494</div><div>Signature of DCPP Project Director</div></div><div><div>3/10/2025</div><div>Date</div></div></div></div>	
<div><div>DocuSigned by:</div><div><div><div>26968FA41F26456</div><div>Signature of Director or Deputy Director of End User Group</div></div><div><div>3/6/2025</div><div>Date</div></div></div></div>	
<div><div>Signed by:</div><div><div><div>E4C0402ECD1D420</div><div>Signature of Director, Deputy Director, or Assistant Director of</div></div><div><div>3/10/2025</div><div>Date</div></div></div></div>	

**ATTACHMENT B**





**COOK COUNTY**  
**OFFICE OF THE**  
**Chief Procurement**  
**Officer**

161 N. Clark  
Suite 2300  
Chicago, Illinois 60601

Date: August 19, 2025

TO: Raffi Sarrafian, Chief Procurement Officer  
Office of the Chief Procurement Officer

FROM: JEANETTA CARDINE  
Jeanetta Cardine, Deputy Director  
Compliance Center of Excellence  
Center of Business Enterprise Development

RE: Contract No. 2038-18543 Amendment 2  
Architectural and Engineering Services for the Public Safety Portfolio for the Countywide Courthouse ADA Comprehensive Assessment, Group 2 at Maywood, Rolling Meadows, Skokie Courthouse, ADA – Target Market Capital Planning - Bureau of Asset Management  
Contractor: Rada Architects, LTD  
Original Contract Value: \$261,116.73  
Original Contract Term: November 1, 2023 through October 31, 2024  
Amendment 1 extended the Contract Term by 1 year with no change to contract value  
Revised Contract Term: November 1, 2023 through October 31, 2025  
Amendment 2 extends the contract term by 6 months from November 1, 2025, through April 30, 2026 and increases the contract value by \$156,104.71 from \$370,071.82 to \$526,176.53  
Revised Contract Value: \$526,176.53  
Revised Contract Term: November 1, 2023 through April 30, 2026  
RFP – Professional Services  
Contract Goal: Target Market

The Center of Business Enterprise Development is in receipt of the above-referenced contract amendment and has reviewed this contract for compliance with the Minority and Women owned Business Enterprises (MBE/WBE) Ordinance. After careful review of our records as reported by the vendor, it has been determined the vendor is in compliance with the MBE/WBE Ordinance.

**Original Contract Utilization Plan (Based on \$370,071.82 Contract Value)**

Contractor	MBE/WBE Status	Certifying Agency	Commitment (Direct)
Rada Architects, LTD	WBE-C F	City of Chicago	70%
Nest Builders, Inc. dba dbHMS	MBE-HA M	City of Chicago	20%
Rubinos & Messia Engineers	MBE-AAPI M	Cook County	5%
Infrastructure Engineering Inc	MBE-AA M	Cook County	5%
<b>Total</b>			<b>100%</b>



**Amendment 1 Utilization Plan (Time Only No Change to Contract Value, Based on \$370,071.82 Contract Value)**

Contractor	MBE/WBE Status	Certifying Agency	Commitment (Direct)
Rada Architects, LTD	WBE-C F	City of Chicago	70%
Nest Builders, Inc. dba dbHMS	MBE-HA M	City of Chicago	20%
Rubinos & Messia Engineers	MBE-AAPI M	Cook County	5%
Infrastructure Engineering Inc	MBE-AA M	Cook County	5%
<b>Total</b>			<b>100%</b>

**Amendment 2 Utilization Plan (Based on \$526,176.53 Contract Value )**

Contractor	MBE/WBE Status	Certifying Agency	Commitment (Direct)
Rada Architects, LTD	WBE-C F	City of Chicago	88% \$461,942.18
Nest Builders, Inc. dba dbHMS	MBE-HA M	City of Chicago	1% 6,975.45
Rubinos & Messia Engineers	MBE-AAPI M	Cook County	0% 0.00
Infrastructure Engineering Inc.	MBE-AA M	Cook County	11% 55,907.89
<b>Total</b>			<b>100%</b>

Amendment 2 extends the contract term by 6 months from November 1, 2025, through April 30, 2026 and increases the contract value by \$156,104.71 from \$370,071.82 to \$526,176.53. During The processing of Amendment 2 RADA has modified its Utilization Plan by eliminating its commitment to Rubinos & Messia Engineers, reducing their commitment to Nest Builders, Inc dba HMS from 10% to 1% and increasing their commitment to Infrastructure Engineering Inc. from 5% to 11%. This contract has 100% MWBE commitment. Both Rubinos and dbHMS provided documentation noting they willingly were reducing their participation on this contract.

Revised MBE/WBE forms were used in the determination of the responsiveness of this amendment.

JC/db

CC David Crawl (OCPO)  
Bradley DeRoo, Capital Planning

**ACORD**<sup>TM</sup>**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

6/18/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> <b>USI Insurance Services LLC</b> <b>2021 Spring Road, Suite 100</b> <b>Oak Brook, IL 60523</b> <b>312 442-7200</b>		<b>CONTACT NAME:</b> Laurie Cloninger <b>PHONE (A/C, No, Ext):</b> 630 625-5219 <b>E-MAIL ADDRESS:</b> AECertificates@usi.com <b>FAX (A/C, No):</b> 610 537-4939															
<b>INSURED</b> <b>RADA Architects, Ltd.</b> <b>233 N Michigan Ave Ste 1900</b> <b>Chicago, IL 60601</b>		<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : RLI Insurance Company</td> <td>13056</td> </tr> <tr> <td>INSURER B : Everest National Insurance Company</td> <td>10120</td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : RLI Insurance Company	13056	INSURER B : Everest National Insurance Company	10120	INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			PSB0002707	12/31/2024	03/03/2026	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY			PSB0002707	12/31/2024	03/03/2026	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			PSE0001863	12/31/2024	03/03/2026	EACH OCCURRENCE \$5,000,000 AGGREGATE \$5,000,000 \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y / <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	PSW0002352	12/31/2024	03/03/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
B	Professional Liability			AAEP000312251	03/03/2025	03/03/2026	\$2,000,000 each claim / \$2,000,000 annual aggr.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Professional Liability is written on a 'claims made' policy form.

**RE: Contract #2038-18543, Architectural & Engineering Services for the Public Safety Portfolio for Countywide Courthouse ADA Comprehensive Assessment, Group 2 at Maywood, Rolling Meadows, Skokie Courthouses, Target Market.**  
**(See Attached Descriptions)**

**CERTIFICATE HOLDER****CANCELLATION**

Cook County  
 118 N. Clark Street, Room 1018  
 Chicago, IL 60602

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Thomas W. Cloninger*

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## DESCRIPTIONS (Continued from Page 1)

The General Liability and Automobile Liability policies include an automatic Additional Insured endorsement that provides Additional Insured status to Cook County, only when there is a written contract that requires such status, and only with regard to work performed by or on behalf of the named insured. The General Liability and Automobile Liability policies contain a special endorsement with Primary and Noncontributory wording, when required by written contract. The General Liability policy includes a Waiver of Subrogation endorsement in favor of County of Cook, its employees, elected officials, agents or representatives. Excess Liability follows form of underlying coverages.

**Cook County**  
**Office of the Chief Procurement Officer**  
**Identification of Subcontractor/Supplier/Subconsultant Form**

<b>OCPO ONLY:</b>	
<input type="checkbox"/>	Disqualification
<input type="checkbox"/>	Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 2038-18543	Date: 6/17/25
Total Bid or Proposal Amount: \$6,975.45	Contract Title: Courthouses ADA Assessments Group 2
Contractor: RADA Architects	Subcontractor/Supplier/ Subconsultant to be Nest Builders Inc, dba dbHMS added or substitute:
Authorized Contact for Contractor: Rada Doytcheva	Authorized Contact for Subcontractor/Supplier/ Benjamin Rubach Subconsultant:
Email Address (Contractor): rada@rada-arch.com	Email Address (Subcontractor): brubach@dbHMS.com
Company Address 233 N Michigan Ave #1900 (Contractor):	Company Address 306 W. Erie St., Ste 600 (Subcontractor):
City, State and Zip (Contractor): Chicago, IL 60601	City, State and Zip (Subcontractor): Chicago, IL 60654
Telephone and Fax (Contractor): 312-856-1970	Telephone and Fax (Subcontractor): 312-915-0557
Estimated Start and Completion Dates 11/1/23 - 4/30/26 (estimated) (Contractor):	Estimated Start and Completion Dates 11/1/23 - 4/30/26 (estimated) (Subcontractor):

**Note:** Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
MEP/FP Engineering	\$6,975.45

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

RADA Architects

Contractor

Rada Doytcheva

Name

Principal

Title

Prime Contractor Signature

6/17/25

Date

**Cook County**  
**Office of the Chief Procurement Officer**  
**Identification of Subcontractor/Supplier/Subconsultant Form**

<b>OCPO ONLY:</b>	
<input type="checkbox"/>	Disqualification
<input type="checkbox"/>	Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 2038-18543	Date: 6/17/25
Total Bid or Proposal Amount: \$6,975.45	Contract Title: Courthouses ADA Assessments Group 2
Contractor: RADA Architects	Subcontractor/Supplier/ Subconsultant to be Nest Builders Inc, dba dbHMS added or substitute:
Authorized Contact for Contractor: Rada Doytcheva	Authorized Contact for Subcontractor/Supplier/ Benjamin Rubach Subconsultant:
Email Address (Contractor): rada@rada-arch.com	Email Address (Subcontractor): brubach@dbHMS.com
Company Address 233 N Michigan Ave #1900 (Contractor):	Company Address 306 W. Erie St., Ste 600 (Subcontractor):
City, State and Zip (Contractor): Chicago, IL 60601	City, State and Zip (Subcontractor): Chicago, IL 60654
Telephone and Fax (Contractor): 312-856-1970	Telephone and Fax (Subcontractor): 312-915-0557
Estimated Start and Completion Dates 11/1/23 - 4/30/26 (estimated) (Contractor):	Estimated Start and Completion Dates 11/1/23 - 4/30/26 (estimated) (Subcontractor):

**Note:** Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
MEP/FP Engineering	\$6,975.45

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

RADA Architects

Contractor

Rada Doytcheva

Name

Principal

Title

Prime Contractor Signature

6/17/25

Date



**MBE/WBE UTILIZATION PLAN - FORM 1**

BIDDER/PROPOSER HEREBY STATES that all MBE/WBE firms included in this Plan are certified MBEs/WBEs by at least one of the entities listed in the General Conditions – Section 19.

**I. BIDDER/PROPOSER MBE/WBE STATUS:** (check the appropriate line)

☒

Bidder/Proposer is a certified MBE or WBE firm. (If so, attach copy of current Letter of Certification)

☐

Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified MBEs or WBEs. (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the MBE/WBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit.

☐

Bidder/Proposer is not a certified MBE or WBE firm, nor a Joint Venture with MBE/WBE partners, but will utilize MBE and WBE firms either directly or indirectly in the performance of the Contract. (If so, complete Sections II below and the Letter(s) of Intent – Form 2).

**II.** ☒ **Direct Participation of MBE/WBE Firms** ☐ **Indirect Participation of MBE/WBE Firms**

**NOTE:** Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will Indirect Participation be considered.

MBEs/WBEs that will perform as subcontractors/suppliers/consultants include the following:

MBE/WBE Firm: RADA Architects  
Address: 233 N. Michigan Ave #1900, Chicago, IL 60601  
E-mail: rada@rada-arch.com  
Contact Person: Rada Doytcheva Phone: 312-856-1970  
Dollar Amount Participation: \$ 461,942.18  
Percent Amount of Participation: 88 %  
\*Letter of Intent attached? Yes ☒ No ☐  
\*Current Letter of Certification attached? Yes ☒ No ☐

MBE/WBE Firm: dbHMS  
Address: 306 W. Erie St, #600, Chicago, IL 60654  
E-mail: brubach@dbhms.com  
Contact Person: Ben Rubach Phone: 312-915-0557  
Dollar Amount Participation: \$ 6,975.45  
Percent Amount of Participation: 1 %  
\*Letter of Intent attached? Yes ☒ No ☐  
\*Current Letter of Certification attached? Yes ☒ No ☐

*Attach additional sheets as needed.*

**\* Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid.**

MBE/WBE UTILIZATION PLAN - FORM 1

continued

MBEs/WBEs that will perform as subcontractors/suppliers/consultants include the following:

MBE/WBE Firm: Infrastructure Engineering

Address: 1 S. Wacker Dr, #2650, Chicago, IL 60606

E-mail: ksmorynski@infrastructure-eng.com

Contact Person: Ken Smorynski Phone: 312-425-9560

Dollar Amount Participation: \$ 55,907.89

Percent Amount of Participation: 11 %

\*Letter of Intent attached? Yes X No \_\_\_\_\_

\*Current Letter of Certification attached? Yes X No \_\_\_\_\_

MBEs/WBEs that will perform as subcontractors/suppliers/consultants include the following:

MBE/WBE Firm: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Dollar Amount Participation: \$ \_\_\_\_\_

Percent Amount of Participation: \_\_\_\_\_ %

\*Letter of Intent attached? Yes \_\_\_\_\_ No \_\_\_\_\_

\*Current Letter of Certification attached? Yes \_\_\_\_\_ No \_\_\_\_\_





**MBE/WBE LETTER OF INTENT - FORM 2**

M/WBE Firm: Nest Builders, Inc. dba dbHMS  
Contact Person: Benjamin Rubach  
Address: 306 W. Erie St., Ste. 600  
City/State: Chicago, IL Zip: 60654  
Phone: 312.915.0557 Fax: 312.915.0558  
Email: brubach@dbhms.com

Certifying Agency: City of Chicago  
Certification Expiration Date: 4.1.26  
Ethnicity: Hispanic  
Bid/Proposal/Contract #: 2038-18543  
FEIN #: 35-2185639

Participation: ☒ Direct ☐ Indirect

Will the M/WBE firm be subcontracting any of the goods or services of this contract to another firm?

☒ No ☐ Yes – Please attach explanation. Proposed Subcontractor(s): N/A

The undersigned M/WBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe M/WBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

MEPFP

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

\$6,975.49

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a MBE/WBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Ben Rubach  
Signature (M/WBE)

Benjamin Rubach

Print Name

Nest Builders, Inc. dba dbH  
Firm Name

6.19.25

Date

Subscribed and sworn before me

this 19th day of June, 2025.

Notary Public Kourtney Nicole Hargrave



SEAL

Rada Doytcheva  
Signature (Prime Bidder/Proposer)

Rada Doytcheva

Print Name

RADA Architects  
Firm Name

6/19/25

Date

Subscribed and sworn before me

this 19th day of June, 2025.

Notary Public Jina Son



SEAL



CITY OF CHICAGO

DEPARTMENT OF PROCUREMENT SERVICES

APR 29 2024

Victor Avila  
Nest Builders, Inc. d/b/a dbHMS  
306 West Erie Street, Suite 600  
Chicago, IL 60654

RE: CONTINUATION OF CERTIFICATION

Dear Mr. Avila:

We are pleased to inform you that **Nest Builders, Inc. d/b/a dbHMS** continues to be certified as a **Minority-Owned Business Enterprise ("MBE")** by the City of Chicago ("City"). This recertification is a continuation of your previous certification which expired **April 1, 2024** and will remain effective for as long as your firm continues to meet all certification eligibility requirements and is contingent upon the firm affirming its eligibility by filing an **annual No-Change Affidavit** each year. In the past, the City has provided you with an annual letter confirming your certification; such letters will no longer be issued. Therefore, we require you to be even more diligent in filing your **annual No-Change Affidavit 60 calendar days before your annual anniversary date of April 1<sup>st</sup>**.

It is now your responsibility to check the City's certification directory and verify your certification status. As a condition of continued certification, you must **file an annual No-Change Affidavit 60 calendar days before your anniversary date of April 1<sup>st</sup>**. Please remember, you have an affirmative duty to file your No-Change Affidavit 60 days prior to the anniversary date for timely processing. Failure to file your annual No-Change Affidavit may result in the suspension or rescission of your certification.

It is important to note that you also have an ongoing affirmative duty to notify the City of any changes in ownership or control of your firm, or any other fact affecting your firm's eligibility for certification **within 10 days** of such change. These changes may include but are not limited to a change of address, change of business structure, change in ownership or ownership structure, change of business operations, gross receipts and or personal net worth that exceed the program threshold. Failure to provide the City with timely notice of such changes may result in the suspension or rescission of your certification. In addition, you may be liable for civil penalties under Chapter 1-22, "False Claims", of the Municipal Code of Chicago.

You shall be deemed to have had your certification lapse and will be ineligible to participate as an **MBE** if you fail to:

- File your annual No-Change Affidavit within the required time period;
- Provide financial or other records requested pursuant to an audit within the required time period;

- Notify the City of any changes affecting your firm's certification **within 10 days** of such change.

You have an obligation to cooperate with the City with any reviews, audits or investigation of its contracts and affirmative action programs. We strongly encourage you to assist us in maintaining the integrity of our programs by reporting instances or suspicions of fraud or abuse to the **City's Inspector General at [chicagoinspectorgeneral.org](http://chicagoinspectorgeneral.org), or 866-IG-TIPLINE (866-448-4754).**

If you or your firm is found to be involved in certification, bidding and/or contractual fraud or abuse, the City will pursue decertification and debarment. In addition to any other penalty imposed by law, any person who knowingly obtains, or knowingly assists another in obtaining a contract with the City by falsely representing the individual or entity, or the individual or entity assisted is guilty of a misdemeanor, punishable by incarceration in the county jail for a period not to exceed six months, or a fine of not less than \$5,000 and not more than \$10,000 or both.

Your firm's name will be listed in the City's Directory of Minority and Women-Owned Business Enterprises in the specialty area(s) of:

**NAICS Code(s):**

**541330 - Engineering Design Services**

**541350 - Building Inspection Services**

Your firm's participation on City contracts will be credited only toward **MBE** goals in your area(s) specialty. While your participation on City contracts is not limited to your area of specialty, credit toward goals will be given only for work that is self-performed and providing a commercially useful function that is done in the approved specialty category.

Thank you for your interest in the City's Minority, Women-Owned Business Enterprise, Veteran-Owned Business Enterprise and Business Enterprise Owned or Operated by People with Disabilities (MBE/WBE/VBE/BEPD) Program.

Sincerely,



Tammi Morgan  
Contracting Equity Officer

TM/sl



## Business & Contact Information

BUSINESS NAME	<b>Nest Builders, Inc., DBA dbHMS</b>
OWNER	<b>Mr. Victor Avila</b>
ADDRESS	<b>306 W. Erie Street Suite 600 Chicago, IL 60654 <a href="#">[map]</a></b>
PHONE	<b>312-915-0557</b>
FAX	<b>312-915-0558</b>
EMAIL	<b><a href="mailto:accounting@dbhms.com">accounting@dbhms.com</a></b>
WEBSITE	<b><a href="http://dbhms.com">http://dbhms.com</a></b>
ETHNICITY	<b>Hispanic/Latino</b>

## Certification Information

CERTIFYING AGENCY	<b>City of Chicago</b>
CERTIFICATION TYPE	<b>MBE - Minority Business Enterprise</b>
CERTIFICATION DATE	<b>3/31/2025</b>
RENEWAL DATE	<b>4/1/2026</b>
EXPIRATION DATE	<b>4/1/2026</b>
CERTIFIED BUSINESS DESCRIPTION	<b>541330 Engineering Design Services 541350 Building Inspection Services</b>

## Commodity Codes

Code	Description
NAICS 541330	Engineering design services
NAICS 541350	Building inspection services

## Additional Information

WARD	<b>42</b>
COMMUNITY AREA	<b>8 Near North Side</b>
QUALIFIED INVESTMENT AREA	<b>No</b>

This profile was generated on 4/15/2025



**MBE/WBE LETTER OF INTENT - FORM 2**

M/WBE Firm: Infrastructure Engineering, Inc  
Contact Person: Michael Sutton, PE  
Address: 1 S. Wacker Dr., Suite 2650  
City/State: Chicago, IL Zip: 60606  
Phone: 312.425.9560 Fax: \_\_\_\_\_  
Email: msutton@infrastructure-eng.com

Certifying Agency: Cook County Government  
Certification Expiration Date: 9/22/2025  
Ethnicity: African-American  
Bid/Proposal/Contract #: 2038-18543  
FEIN #: 36-3527342

Participation: ☒ Direct ☐ Indirect

Will the M/WBE firm be subcontracting any of the goods or services of this contract to another firm?

☒ No ☐ Yes - Please attach explanation. Proposed Subcontractor(s): \_\_\_\_\_

The undersigned M/WBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe M/WBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

Infrastructure Engineering, Inc will provide site assessments and transfer packages for each of the following courthouse sites: Maywood Courthouse, Rolling Meadows Courthouse, Skokie Courthouse, and Harrison Courthouse. The site assessment shall involve a walk-through survey to identify and communicate any physical deficiencies, conspicuous defects or materials, deferred maintenance of the subject property's material, systems, or equipment as it relates to ADA compliance. The transfer packages shall be approximately 30% Schematic Design documents including but not limited to, formal documentation of the site assessment findings / recommendations, site plans, and a rough order of magnitude construction cost estimate.

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:  
Fifty-five thousand, nine hundred seven dollars and eighty-nine cents [\$55,907.89] not-to-exceed cost plus fixed fee.

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a MBE/WBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service, Supply and Fee/Cost were completed.

[Signature]  
Signature (M/WBE)

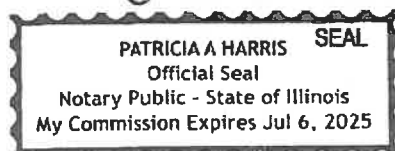
Kashif Khan, PE, President  
Print Name

Infrastructure Engineering, Inc.  
Firm Name

June 20, 2025  
Date

Subscribed and sworn before me

this 20<sup>th</sup> day of JUNE, 2025  
Notary Public: [Signature]



[Signature]  
Signature (Prime Bidder/Proposer)

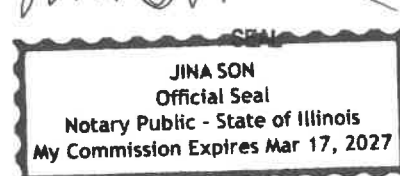
Rada Doytcheva  
Print Name

RADA Architects  
Firm Name

6/20/25  
Date

Subscribed and sworn before me

this 20<sup>th</sup> day of June, 2025  
Notary Public: [Signature]





**MBE/WBE LETTER OF INTENT - FORM 2**

M/WBE Firm: RADA Architects, Ltd.  
Contact Person: Rada Doytcheva  
Address: 233 N Michigan Ave #1900  
City/State: Chicago, IL Zip: 60601  
Phone: 312-856-1970 Fax: 312-856-1978  
Email: rada@rada-arch.com

Certifying Agency: City of Chicago  
Certification Expiration Date: 2/15/26  
Ethnicity: Caucasian  
Bid/Proposal/Contract #: 2038-18543  
FEIN #: 36-3945019

Participation: ☒ Direct ☐ Indirect

Will the M/WBE firm be subcontracting any of the goods or services of this contract to another firm?

☒ No ☐ Yes – Please attach explanation. Proposed Subcontractor(s): \_\_\_\_\_

The undersigned M/WBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe M/WBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

Architecture; Prime Consultant

Indicate the **Dollar Amount**, **Percentage**, and the **Terms of Payment** for the above-described Commodities/ Services:

\$461,942.18

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a MBE/WBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

[Signature]  
Signature (M/WBE)

Rada Doytcheva

Print Name

RADA Architects, Ltd.

Firm Name

7/21/25

Date

Subscribed and sworn before me

this 21<sup>st</sup> day of July, 2025

Notary Public [Signature]

[Signature]  
Signature (Prime Bidder/Proposer)

Rada Doytcheva

Print Name

RADA Architects, Ltd.

Firm Name

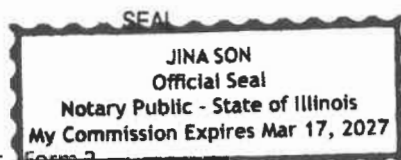
7/21/25

Date

Subscribed and sworn before me

this 21<sup>st</sup> day of July, 2025

Notary Public [Signature]







CITY OF CHICAGO

DEPARTMENT OF PROCUREMENT SERVICES

MAR 15 2021

Radosveta Doytcheva  
RADA Architects, Ltd.  
233 N. Michigan Ave., Suite 1900  
Chicago, IL 60601

Dear Ms. Doytcheva:

We are pleased to inform you that **RADA Architects, Ltd.** has been recertified as a **Women-Owned Business Enterprise ("WBE")** by the City of Chicago ("City"). This **WBE** certification is valid until **2/15/2026**; however, your firm's certification must be revalidated annually. In the past the City has provided you with an annual letter confirming your certification; such letters will no longer be issued. Therefore, we require you to be even more diligent in filing your **annual No-Change Affidavit 60 days** before your annual anniversary date.

It is now your responsibility to check the City's certification directory and verify your certification status. As a condition of continued certification during the five-year period stated above, you must file an **annual No-Change Affidavit**. Your firm's annual No-Change Affidavit is due by **2/15/2022, 2/15/2023, 2/15/2024 and 2/15/2025**. Please remember, you have an affirmative duty to file your No-Change Affidavit 60 days prior to the date of expiration. Failure to file your annual No-Change Affidavit may result in the suspension or rescission of your certification.

Your firm's five-year certification will expire on **2/15/2026**. You have an affirmative duty to file for recertification **60 days** prior to the date of the five-year anniversary date. Therefore, you must file for recertification by **12/15/2025**.

It is important to note that you also have an ongoing affirmative duty to notify the City of any changes in ownership or control of your firm, or any other fact affecting your firm's eligibility for certification **within 10 days** of such change. These changes may include but are not limited to a change of address, change of business structure, change in ownership or ownership structure, change of business operations, gross receipts and or personal net worth that exceed the program threshold. Failure to provide the City with timely notice of such changes may result in the suspension or rescission of your certification. In addition, you may be liable for civil penalties under Chapter 1-22, "False Claims", of the Municipal Code of Chicago.

Please note – you shall be deemed to have had your certification lapse and will be ineligible to participate as a **WBE** if you fail to:

*DMO*



- File your annual No-Change Affidavit within the required time period;
- Provide financial or other records requested pursuant to an audit within the required time period;
- Notify the City of any changes affecting your firm's certification **within 10 days** of such change; or
- File your recertification within the required time period.

Please be reminded of your contractual obligation to cooperate with the City with respect to any reviews, audits or investigation of its contracts and affirmative action programs. We strongly encourage you to assist us in maintaining the integrity of our programs by reporting instances or suspicions of fraud or abuse to the **City's Inspector General at [chicagoinspectorgeneral.org](http://chicagoinspectorgeneral.org), or 866-IG-TIPLINE (866-448-4754).**

Be advised that if you or your firm is found to be involved in certification, bidding and/or contractual fraud or abuse, the City will pursue decertification and debarment. In addition to any other penalty imposed by law, any person who knowingly obtains, or knowingly assists another in obtaining a contract with the City by falsely representing the individual or entity, or the individual or entity assisted is guilty of a misdemeanor, punishable by incarceration in the county jail for a period not to exceed six months, or a fine of not less than \$5,000 and not more than \$10,000 or both.

Your firm's name will be listed in the City's Directory of Minority and Women-Owned Business Enterprises in the specialty area(s) of:

**NAICS Code(s):**

**541310 - Architectural (except landscape) Services**

**541310 - Building Architectural Design Services**

**541320 - Urban Planning Services**

**541340 - Drafting Services**

Your firm's participation on City contracts will be credited only toward **WBE** goals in your area(s) specialty. While your participation on City contracts is not limited to your area of specialty, credit toward goals will be given only for work that is self-performed and providing a commercially useful function that is done in the approved specialty category.

Thank you for your interest in the City's Minority, Women-Owned Business Enterprise, Veteran-Owned Business Enterprise and Business Enterprise Owned or Operated by People with Disabilities (MBE/WBE/VBE/BEPD) Program.

Sincerely,



Shannon E. Andrews  
Chief Procurement Officer

SEA/kr



**Cook County  
Office of the Chief Procurement Officer**

**Economic Disclosure Statement Recertification Affidavit**

Applicant/Holder Name: RADA Architects, Ltd.

Contract #: 2038-18543

Address: 233 N Michigan Ave, Suite 1900

City: Chicago

County: Cook

State: IL

Zip: 60601

Phone: 312-856-1970

Email: rada@rada-arch.com

**Instructions**

If the Applicant is a corporation, the President must execute this affidavit. If executed by someone other than the President, attach hereto a certified copy of that section of the Corporate By-Laws or other authorization, satisfactory to the County that permits the person to execute this affidavit for the corporation.

If the Applicant is a partnership or joint venture, all partners or joint venturers must execute this affidavit, unless one partner or joint venturer has been authorized to sign.

If the Applicant is a member-managed LLC all members must execute this affidavit, unless otherwise provided in the operating agreement, resolution or other corporate documents.

If the Applicant is a Sole Proprietorship, the sole proprietor must execute this affidavit.

This recertification is being submitted in connection with

Contract Name: A/E Services for the Public Safety Portfolio for Countywide Courthouse ADA Comprehensive Assessment,  
Group 2 at Maywood, Rolling Meadows and Skokie Courthouses – Target Market

Under penalty of perjury, the person signing below: (1) warrants that he/she is authorized to execute this Economic Disclosure Statement ("EDS") recertification on behalf of the Applicant/Holder, (2) warrants that all certifications and statements contained in the Applicant/Holder's last submitted EDS dated are true, accurate and complete as of the date furnished to the County and continue to be true, accurate and complete as of the date of this recertification, and (3) reaffirms its acknowledgments.



Recertification of:

- ☒ Certifications (SECTION 2), if applicable, as updated on: 9/12/23
- ☒ Economic and Other Disclosures (SECTION 3), if applicable, as updated on: 7/12/24
- ☒ Cook County Child Support Affidavit (Please submit any additional Child Support Obligations as an attachment to this form), if applicable, as updated on: 9/12/23
- ☒ Cook County Disclosure of Ownership Interest Statement, if applicable, as updated on: 9/12/23
- ☒ Cook County Board of Ethics Familial Relationship Disclosure Form, if applicable, as updated on: 7/12/24
- ☒ Cook County Affidavit for Wage Theft Ordinance (SECTION 4), if applicable, as updated on: 9/12/23

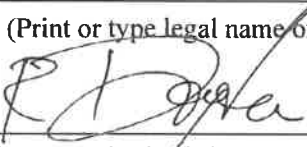
If your recertification of any of the above is related to information contained in an updated form submitted after the last submitted full EDS, please indicate the date such information was updated.

IMPORTANT: If you are unable to re-certify any section(s) of your previous EDS, please submit a truthful, fully updated version of that section(s) of the EDS including separate signatures where required.

By: RADA Architects, Ltd.

Date: 7/21/25

(Print or type legal name of Applicant/Holder)



President or authorized signatory (Signature)

Print or type name of President or authorized signatory:

Radosveta Doytcheva

Title of signatory:

President

Subscribed and sworn to before me on this 21<sup>st</sup> day of July, 2025

Notary Public Signature:  Seal:



**COOK COUNTY  
ECONOMIC DISCLOSURE STATEMENT  
AND EXECUTION DOCUMENT  
INDEX**

<b>Section</b>	<b>Description</b>	<b>Pages</b>
1	Instructions for Completion of EDS	EDS i - ii
2	Certifications	EDS 1- 2
3	Economic and Other Disclosures, Affidavit of Child Support Obligations, Disclosure of Ownership Interest and Familial Relationship Disclosure Form	EDS 3 – 12
4	Cook County Affidavit for Wage Theft Ordinance	EDS 13-14
5	Contract and EDS Execution Page	EDS 15
6	Cook County Signature Page	EDS 16

**SECTION 1**  
**INSTRUCTIONS FOR COMPLETION OF**  
**ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT**

This Economic Disclosure Statement and Execution Document ("EDS") is to be completed and executed by every Bidder on a County contract, every Proposer responding to a Request for Proposals, and every Respondent responding to a Request for Qualifications, and others as required by the Chief Procurement Officer. The execution of the EDS shall serve as the execution of a contract awarded by the County. The Chief Procurement Officer reserves the right to request that the Bidder or Proposer, or Respondent provide an updated EDS on an annual basis.

**Definitions.** Terms used in this EDS and not otherwise defined herein shall have the meanings given to such terms in the Instructions to Bidders, General Conditions, Request for Proposals, Request for Qualifications, as applicable.

*Affiliate* means a person that directly or indirectly through one or more intermediaries, Controls is Controlled by, or is under common Control with the Person specified.

*Applicant* means a person who executes this EDS.

*Bidder* means any person who submits a Bid.

*Code* means the Code of Ordinances, Cook County, Illinois available on municode.com.

*Contract* shall include any written document to make Procurements by or on behalf of Cook County.

*Contractor or Contracting Party* means a person that enters into a Contract with the County.

*Control* means the unfettered authority to directly or indirectly manage governance, administration, work, and all other aspects of a business.

*EDS* means this complete Economic Disclosure Statement and Execution Document, including all sections listed in the Index and any attachments.

*Joint Venture* means an association of two or more Persons proposing to perform a for-profit business enterprise. Joint Ventures must have an agreement in writing specifying the terms and conditions of the relationship between the partners and their relationship and respective responsibility for the Contract

*Lobby or lobbying* means to, for compensation, attempt to influence a County official or County employee with respect to any County matter.

*Lobbyist* means any person who lobbies.

*Person or Persons* means any individual, corporation, partnership, Joint Venture, trust, association, Limited Liability Company, sole proprietorship or other legal entity.

*Prohibited Acts* means any of the actions or occurrences which form the basis for disqualification under the Code, or under the Certifications hereinafter set forth.

*Proposal* means a response to an RFP.

*Proposer* means a person submitting a Proposal.

*Response* means response to an RFQ.

*Respondent* means a person responding to an RFQ.

*RFP* means a Request for Proposals issued pursuant to this Procurement Code.

*RFQ* means a Request for Qualifications issued to obtain the qualifications of interested parties.

**INSTRUCTIONS FOR COMPLETION OF  
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT**

**Section 1: Instructions.** Section 1 sets forth the instructions for completing and executing this EDS.

**Section 2: Certifications.** Section 2 sets forth certifications that are required for contracting parties under the Code and other applicable laws. Execution of this EDS constitutes a warranty that all the statements and certifications contained, and all the facts stated, in the Certifications are true, correct and complete as of the date of execution.

**Section 3: Economic and Other Disclosures Statement.** Section 3 is the County's required Economic and Other Disclosures Statement form. Execution of this EDS constitutes a warranty that all the information provided in the EDS is true, correct and complete as of the date of execution, and binds the Applicant to the warranties, representations, agreements and acknowledgements contained therein.

**Required Updates.** The Applicant is required to keep all information provided in this EDS current and accurate. In the event of any change in the information provided, including but not limited to any change which would render inaccurate or incomplete any certification or statement made in this EDS, the Applicant shall supplement this EDS up to the time the County takes action, by filing an amended EDS or such other documentation as is required.

**Additional Information.** The County's Governmental Ethics and Campaign Financing Ordinances impose certain duties and obligations on persons or entities seeking County contracts, work, business, or transactions, and the Applicant is expected to comply fully with these ordinances. For further information please contact the Director of Ethics at (312) 603-4304 (69 W. Washington St. Suite 3040, Chicago, IL 60602) or visit the web-site at [cookcountyil.gov/ethics-board-of](http://cookcountyil.gov/ethics-board-of).

**Authorized Signers of Contract and EDS Execution Page.** If the Applicant is a corporation, the President and Secretary must execute the EDS. In the event that this EDS is executed by someone other than the President, attach hereto a certified copy of that section of the Corporate By-Laws or other authorization by the Corporation, satisfactory to the County that permits the person to execute EDS for said corporation. If the corporation is not registered in the State of Illinois, a copy of the Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a partnership or joint venture, all partners or joint venturers must execute the EDS, unless one partner or joint venture has been authorized to sign for the partnership or joint venture, in which case, the partnership agreement, resolution or evidence of such authority satisfactory to the Office of the Chief Procurement Officer must be submitted with this Signature Page.

If the Applicant is a member-managed LLC all members must execute the EDS, unless otherwise provided in the operating agreement, resolution or other corporate documents. If the Applicant is a manager-managed LLC, the manager(s) must execute the EDS. The Applicant must attach either a certified copy of the operating agreement, resolution or other authorization, satisfactory to the County, demonstrating such person has the authority to execute the EDS on behalf of the LLC. If the LLC is not registered in the State of Illinois, a copy of a current Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a Sole Proprietorship, the sole proprietor must execute the EDS.

A "Partnership" "Joint Venture" or "Sole Proprietorship" operating under an Assumed Name must be registered with the Illinois county in which it is located, as provided in 805 ILCS 405 (2012), and documentation evidencing registration must be submitted with the EDS.

Effective October 1, 2016 all foreign corporations and LLCs must be registered with the Illinois Secretary of State's Office unless a statutory exemption applies to the applicant. Applicants who are exempt from registering must provide a written statement explaining why they are exempt from registering as a foreign entity with the Illinois Secretary of State's Office.

**SECTION 2****CERTIFICATIONS**

THE FOLLOWING CERTIFICATIONS ARE MADE PURSUANT TO STATE LAW AND THE CODE. THE APPLICANT IS CAUTIONED TO CAREFULLY READ THESE CERTIFICATIONS PRIOR TO SIGNING THE SIGNATURE PAGE. SIGNING THE SIGNATURE PAGE SHALL CONSTITUTE A WARRANTY BY THE APPLICANT THAT ALL THE STATEMENTS, CERTIFICATIONS AND INFORMATION SET FORTH WITHIN THESE CERTIFICATIONS ARE TRUE, COMPLETE AND CORRECT AS OF THE DATE THE SIGNATURE PAGE IS SIGNED. THE APPLICANT IS NOTIFIED THAT IF THE COUNTY LEARNS THAT ANY OF THE FOLLOWING CERTIFICATIONS WERE FALSELY MADE, THAT ANY CONTRACT ENTERED INTO WITH THE APPLICANT SHALL BE SUBJECT TO TERMINATION.

**A. PERSONS AND ENTITIES SUBJECT TO DISQUALIFICATION**

No person or business entity shall be awarded a contract or sub-contract, for a period of five (5) years from the date of conviction or entry of a plea or admission of guilt, civil or criminal, if that person or business entity:

- 1) Has been convicted of an act committed, within the State of Illinois, of bribery or attempting to bribe an officer or employee of a unit of state, federal or local government or school district in the State of Illinois in that officer's or employee's official capacity;
- 2) Has been convicted by federal, state or local government of an act of bid-rigging or attempting to rig bids as defined in the Sherman Anti-Trust Act and Clayton Act. Act. 15 U.S.C. Section 1 *et seq.*;
- 3) Has been convicted of bid-rigging or attempting to rig bids under the laws of federal, state or local government;
- 4) Has been convicted of an act committed, within the State, of price-fixing or attempting to fix prices as defined by the Sherman Anti-Trust Act and the Clayton Act. 15 U.S.C. Section 1, *et seq.*;
- 5) Has been convicted of price-fixing or attempting to fix prices under the laws the State;
- 6) Has been convicted of defrauding or attempting to defraud any unit of state or local government or school district within the State of Illinois;
- 7) Has made an admission of guilt of such conduct as set forth in subsections (1) through (6) above which admission is a matter of record, whether or not such person or business entity was subject to prosecution for the offense or offenses admitted to; or
- 8) Has entered a plea of *nolo contendere* to charge of bribery, price-fixing, bid-rigging, or fraud, as set forth in subparagraphs (1) through (6) above.

In the case of bribery or attempting to bribe, a business entity may not be awarded a contract if an official, agent or employee of such business entity committed the Prohibited Act on behalf of the business entity and pursuant to the direction or authorization of an officer, director or other responsible official of the business entity, and such Prohibited Act occurred within three years prior to the award of the contract. In addition, a business entity shall be disqualified if an owner, partner or shareholder controlling, directly or indirectly, 20% or more of the business entity, or an officer of the business entity has performed any Prohibited Act within five years prior to the award of the Contract.

**THE APPLICANT HEREBY CERTIFIES THAT:** The Applicant has read the provisions of Section A, Persons and Entities Subject to Disqualification, that the Applicant has not committed any Prohibited Act set forth in Section A, and that award of the Contract to the Applicant would not violate the provisions of such Section or of the Code.

**B. BID-RIGGING OR BID ROTATING**

**THE APPLICANT HEREBY CERTIFIES THAT:** In accordance with 720 ILCS 5/33 E-11, neither the Applicant nor any Affiliated Entity is barred from award of this Contract as a result of a conviction for the violation of State laws prohibiting bid-rigging or bid rotating.

**C. DRUG FREE WORKPLACE ACT**

**THE APPLICANT HEREBY CERTIFIES THAT:** The Applicant will provide a drug free workplace, as required by (30 ILCS 580/3).

**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, such as bar 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](http://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](http://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 State 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.



SECTION 3

REQUIRED DISCLOSURES

1. DISCLOSURE OF LOBBYIST CONTACTS

List all persons that have made lobbying contacts on your behalf with respect to this contract:

Name	Address
N/A	

2. LOCAL BUSINESS PREFERENCE STATEMENT (CODE, CHAPTER 34, SECTION 34-230)

*Local business* means a Person, including a foreign corporation authorized to transact business in Illinois, having a bona fide establishment located within the County at which it is transacting business on the date when a Bid is submitted to the County, and which employs the majority of its regular, full-time work force within the County. A Joint Venture shall constitute a Local Business if one or more Persons that qualify as a "Local Business" hold interests totaling over 50 percent in the Joint Venture, even if the Joint Venture does not, at the time of the Bid submittal, have such a bona fide establishment within the County.

a) Is Applicant a "Local Business" as defined above?

Yes: ☒ No: ☐

b) If yes, list business addresses within Cook County:

233 N Michigan Ave #1900

Chicago, IL 60601

c) Does Applicant employ the majority of its regular full-time workforce within Cook County?

Yes: ☒ No: ☐

3. THE CHILD SUPPORT ENFORCEMENT ORDINANCE (CODE, CHAPTER 34, SECTION 34-172)

Every Applicant for a County Privilege shall be in full compliance with any child support order before such Applicant is entitled to receive or renew a County Privilege. When delinquent child support exists, the County shall not issue or renew any County Privilege, and may revoke any County Privilege.

All Applicants are required to review the Cook County Affidavit of Child Support Obligations attached to this EDS (EDS-5) and complete the Affidavit, based on the instructions in the Affidavit.

**4. REAL ESTATE OWNERSHIP DISCLOSURES.**

The Applicant must indicate by checking the appropriate provision below and providing all required information that either:

- a) The following is a complete list of all real estate owned by the Applicant in Cook County:

PERMANENT INDEX NUMBER(S): 17-10-318-031-1287  
17-10-318-031-1286  
17-10-400-048-1897  
(ATTACH SHEET IF NECESSARY TO LIST ADDITIONAL INDEX NUMBERS)

**OR:**

- b) ☐ The Applicant owns no real estate in Cook County.

**5. EXCEPTIONS TO CERTIFICATIONS OR DISCLOSURES.**

If the Applicant is unable to certify to any of the Certifications or any other statements contained in this EDS and not explained elsewhere in this EDS, the Applicant must explain below:

If the letters, "NA", the word "None" or "No Response" appears above, or if the space is left blank, it will be conclusively presumed that the Applicant certified to all Certifications and other statements contained in this EDS.

**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. **County reserves the right to request additional information to verify veracity of information contained in this statement.**

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 RADA Architects Ltd

D/B/A: N/A FEIN # Only: 36-3945019

Street Address: 233 N Michigan Ave #1900

City: Chicago State: IL Zip Code: 60601

Phone No.: 312-856-1970 Fax Number: 312-856-1978 Email: rada@rada-arch.com

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

Corporate File Number (if applicable): 5776-028-1

**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
Radosveta Doytcheva	360 E Randolph St #4103, Chicago, IL 60601	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

**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
Radosveta Doytcheva	360 E Randolph St #4103 Chicago, IL 60601	President/Sole Owner	Founded the company in 1994

**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**

**Radosveta Doytcheva**

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

Signature

**rada@rada-arch.com**

E-mail address

**President**

Title

**08/05/2025**

Date

**312-856-1970**

Phone Number

Subscribed to and sworn before me  
this 5th day of August 2025

My commission expires: 3/17/2027

X

Notary Public Signature

Notary Seal





**COOK COUNTY BOARD OF ETHICS**  
 69 W. WASHINGTON STREET, SUITE 3040  
 CHICAGO, ILLINOIS 60602  
 312/603-4304 Office 312/603-9988 Fax

**FAMILIAL RELATIONSHIP DISCLOSURE PROVISION**

**Nepotism Disclosure Requirement:**

Doing a significant amount of business with the County requires that you disclose to the Board of Ethics the existence of any familial relationships with any County employee or any person holding elective office in the State of Illinois, the County, or in any municipality within the County. The Ethics Ordinance defines a significant amount of business for the purpose of this disclosure requirement as more than \$25,000 in aggregate County leases, contracts, purchases or sales in any calendar year.

If you are unsure of whether the business you do with the County or a County agency will cross this threshold, err on the side of caution by completing the attached familial disclosure form because, among other potential penalties, any person found guilty of failing to make a required disclosure or knowingly filing a false, misleading, or incomplete disclosure will be prohibited from doing any business with the County for a period of three years. The required disclosure should be filed with the Board of Ethics by January 1 of each calendar year in which you are doing business with the County and again with each bid/proposal/quotation to do business with Cook County. The Board of Ethics may assess a late filing fee of \$100 per day after an initial 30-day grace period.

The person that is doing business with the County must disclose his or her familial relationships. If the person on the County lease or contract or purchasing from or selling to the County is a business entity, then the business entity must disclose the familial relationships of the individuals who are and, during the year prior to doing business with the County, were:

- its board of directors,
- its officers,
- its employees or independent contractors responsible for the general administration of the entity,
- its agents authorized to execute documents on behalf of the entity, and
- its employees who directly engage or engaged in doing work with the County on behalf of the entity.

Do not hesitate to contact the Board of Ethics at (312) 603-4304 for assistance in determining the scope of any required familial relationship disclosure.

**Additional Definitions:**

*"Familial relationship"* means a person who is a spouse, domestic partner or civil union partner of a County employee or State, County or municipal official, or any person who is related to such an employee or official, whether by blood, marriage or adoption, as a:

- |                                  |  |                                       |
|----------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Parent  | <input type="checkbox"/> Grandparent     | <input type="checkbox"/> Stepfather   |
| <input type="checkbox"/> Child   | <input type="checkbox"/> Grandchild      | <input type="checkbox"/> Stepmother   |
| <input type="checkbox"/> Brother | <input type="checkbox"/> Father-in-law   | <input type="checkbox"/> Stepson      |
| <input type="checkbox"/> Sister  | <input type="checkbox"/> Mother-in-law   | <input type="checkbox"/> Stepdaughter |
| <input type="checkbox"/> Aunt    | <input type="checkbox"/> Son-in-law      | <input type="checkbox"/> Stepbrother  |
| <input type="checkbox"/> Uncle   | <input type="checkbox"/> Daughter-in-law | <input type="checkbox"/> Stepsister   |
| <input type="checkbox"/> Niece   | <input type="checkbox"/> Brother-in-law  | <input type="checkbox"/> Halfbrother  |
| <input type="checkbox"/> Nephew  | <input type="checkbox"/> Sister-in-law   | <input type="checkbox"/> Halfsister   |

**COOK COUNTY BOARD OF ETHICS  
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

**A. PERSON DOING OR SEEKING TO DO BUSINESS WITH THE COUNTY**Name of Person Doing Business with the County: RADA Architects LtdAddress of Person Doing Business with the County: 233 N Michigan Ave #1900, Chicago, IL 60601Phone number of Person Doing Business with the County: 312-856-1970Email address of Person Doing Business with the County: rada@rada-arch.com

If Person Doing Business with the County is a Business Entity, provide the name, title and contact information for the individual completing this disclosure on behalf of the Person Doing Business with the County:

Radosveta Doytcheva, President / Sole Owner, RADA Architects, 312-856-1970, rada@rada-arch.com

**B. DESCRIPTION OF BUSINESS WITH THE COUNTY**

*Append additional pages as needed and for each County lease, contract, purchase or sale sought and/or obtained during the calendar year of this disclosure (or the preceding calendar year if disclosure is made on January 1), identify:*

The lease number, contract number, purchase order number, request for proposal number and/or request for qualification number associated with the business you are doing or seeking to do with the County: \_\_\_\_\_

Contract # 2038-18543

The aggregate dollar value of the business you are doing or seeking to do with the County: \$ 526,176.53

The name, title and contact information for the County official(s) or employee(s) involved in negotiating the business you are doing or seeking to do with the County: \_\_\_\_\_

David Crawl, Contract Negotiator, 312-603-0831, david.crawl2@cookcountyll.gov

The name, title and contact information for the County official(s) or employee(s) involved in managing the business you are doing or seeking to do with the County: \_\_\_\_\_

Bradley DeRoo, Project Director, 312-603-1130, bradley.deroo@cookcountyll.gov

**C. DISCLOSURE OF FAMILIAL RELATIONSHIPS WITH COUNTY EMPLOYEES OR STATE, COUNTY OR MUNICIPAL ELECTED OFFICIALS**

*Check the box that applies and provide related information where needed*

- ☐ The Person Doing Business with the County **is an individual** and there is **no familial relationship** between this individual and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.
- ☒ The Person Doing Business with the County **is a business entity** and there is **no familial relationship** between any member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity or employees directly engaged in contractual work with the County on behalf of the business entity, and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.

**COOK COUNTY BOARD OF ETHICS  
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

- ☐ The Person Doing Business with the County **is an individual** and **there is a familial relationship** between this individual and at least one Cook County employee and/or a person or persons holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County. **The familial relationships are as follows:**

Name of Individual Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*If more space is needed, attach an additional sheet following the above format.*

- ☐ The Person Doing Business with the County **is a business entity** and **there is a familial relationship** between at least one member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity and/or employees directly engaged in contractual work with the County on behalf of the business entity, on the one hand, and at least one Cook County employee and/or a person holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County, on the other. **The familial relationships are as follows:**

Name of Member of Board of Director for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Officer for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



Name of Person Responsible for the General Administration of the Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
---	--	--	-------------------------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Agent Authorized to Execute Documents for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
---	--	--	-------------------------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Employee of Business Entity Directly Engaged in Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
---	--	--	-------------------------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*If more space is needed, attach an additional sheet following the above format.*

**VERIFICATION:** To the best of my knowledge, the information I have provided on this disclosure form is accurate and complete. I acknowledge that an inaccurate or incomplete disclosure is punishable by law, including but not limited to fines and debarment.

  
Signature of Recipient

08/05/2025  
Date

**SUBMIT COMPLETED FORM TO:** Cook County Board of Ethics  
69 West Washington Street, Suite 3040, Chicago, Illinois 60602  
Office (312) 603-4304 – Fax (312) 603-9988  
CookCounty.Ethics@cookcountyil.gov

\* Spouse, domestic partner, civil union partner or parent, child, sibling, aunt, uncle, niece, nephew, grandparent or grandchild by blood, marriage (i.e. in laws and step relations) or adoption.

## SECTION 4

**COOK COUNTY AFFIDAVIT FOR WAGE THEFT ORDINANCE**

Effective May 1, 2015, every Person, ***including Substantial Owners***, seeking a Contract with Cook County must comply with the Cook County Wage Theft Ordinance set forth in Chapter 34, Article IV, Section 179. Any Person/Substantial Owner, who fails to comply with Cook County Wage Theft Ordinance, may request that the Chief Procurement Officer grant a reduction or waiver in accordance with Section 34-179(d).

"Contract" means any written document to make Procurements by or on behalf of Cook County.

"Person" means any individual, corporation, partnership, Joint Venture, trust, association, limited liability company, sole proprietorship or other legal entity.

"Procurement" means obtaining supplies, equipment, goods, or services of any kind.

"Substantial Owner" means any person or persons who own or hold a twenty-five percent (25%) or more percentage of interest in any business entity seeking a County Privilege, including those shareholders, general or limited partners, beneficiaries and principals; except where a business entity is an individual or sole proprietorship, Substantial Owner means that individual or sole proprietor.

All Persons/Substantial Owners are required to complete this affidavit and comply with the Cook County Wage Theft Ordinance before any Contract is awarded. Signature of this form constitutes a certification the information provided below is correct and complete, and that the individual(s) signing this form has/have personal knowledge of such information. **County reserves the right to request additional information to verify veracity of information contained in this Affidavit.**

**I. Contract Information:**

Contract Number: #2038-18543  
 County Using Agency (requesting Procurement): Department of Capital Planning and Policy

**II. Person/Substantial Owner Information:**

Person (Corporate Entity Name): RADA Architects Ltd  
 Substantial Owner Complete Name: Radosveta Doytcheva  
 FEIN# 36-3945019  
 Date of Birth: [REDACTED] E-mail address: rada@rada-arch.com  
 Street Address: 233 N Michigan Ave #1900  
 City: Chicago State: IL Zip: 60601  
 Home Phone: [REDACTED]

**III. Compliance with Wage Laws:**

Within the past five years has the Person/Substantial Owner, in any judicial or administrative proceeding, been convicted of, entered a plea, made an admission of guilt or liability, or had an administrative finding made for committing a repeated or willful violation of any of the following laws:

No	<i>Illinois Wage Payment and Collection Act, 820 ILCS 115/1 et seq.,</i>	<b>YES or NO</b>
No	<i>Illinois Minimum Wage Act, 820 ILCS 105/1 et seq.,</i>	<b>YES or NO</b>
No	<i>Illinois Worker Adjustment and Retraining Notification Act, 820 ILCS 65/1 et seq.,</i>	<b>YES or NO</b>
No	<i>Employee Classification Act, 820 ILCS 185/1 et seq.,</i>	<b>YES or NO</b>
No	<i>Fair Labor Standards Act of 1938, 29 U.S.C. 201, et seq.,</i>	<b>YES or NO</b>
No	<i>Any comparable state statute or regulation of any state, which governs the payment of wages</i>	<b>YES or NO</b>

If the Person/Substantial Owner answered "Yes" to any of the questions above, it is ineligible to enter into a Contract with Cook County, but can request a reduction or waiver under **Section IV**.

**IV. Request for Waiver or Reduction**

If Person/Substantial Owner answered "Yes" to any of the questions above, it may request a reduction or waiver in accordance with Section 34-179(d), provided that the request for reduction of waiver is made on the basis of one or more of the following actions that have taken place:

- No        There has been a bona fide change in ownership or Control of the ineligible Person or Substantial Owner. YES or NO
- No        Disciplinary action has been taken against the individual(s) responsible for the acts giving rise to the violation. YES or NO
- No        Remedial action has been taken to prevent a recurrence of the acts giving rise to the disqualification or default. YES or NO
- No        Other factors that the Person or Substantial Owner believe are relevant. YES or NO

The Person/Substantial Owner must submit documentation to support the basis of its request for a reduction or waiver. The Chief Procurement Officer reserves the right to make additional inquiries and request additional documentation.

**V. Affirmation**

The Person/Substantial Owner affirms that all statements contained in the Affidavit are true, accurate and complete.

Signature: \_\_\_\_\_

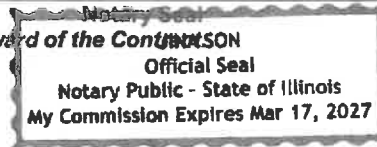
Date: 8/5/25

Name of Person signing (Print): Rodoveta Boytcheva Title: President

Subscribed and sworn to before me this 5th day of August, 20 25

X \_\_\_\_\_  
Notary Public Signature

Note: The above information is subject to verification prior to the award of the Contract.



## SECTION 5

## CONTRACT AND EDS EXECUTION PAGE

The Applicant hereby certifies and warrants that all of the statements, certifications and representations set forth in this EDS are true, complete and correct; that the Applicant is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Applicant with all the policies and requirements set forth in this EDS; and that all facts and information provided by the Applicant in this EDS are true, complete and correct. The Applicant agrees to inform the Chief Procurement Officer in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege.

## Execution by Corporation

RADA Architects Ltd

Corporation's Name

312-856-1970

Telephone

Secretary Signature

President's Printed Name and Signature

rada@rada-arch.com

Email

08/05/2025

Date

## Execution by LLC

LLC Name

\*Member/Manager Printed Name and Signature

Date

Telephone and Email

## Execution by Partnership/Joint Venture

Partnership/Joint Venture Name

\*Partner/Joint Venturer Printed Name and Signature

Date

Telephone and Email

## Execution by Sole Proprietorship

Printed Name Signature

Assumed Name (if applicable)

Date

Telephone and Email

Subscribed and sworn to before me this

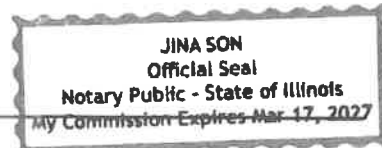
5th day of August, 2025

Notary Public Signature

My commission expires:

3/17/2027

Notary Seal



\*If the operating agreement, partnership agreement or governing documents requiring execution by multiple members, managers, partners, or joint venturers, please complete and execute additional Contract and EDS Execution Pages.

**SECTION 6**  
**COOK COUNTY SIGNATURE PAGE**

ON BEHALF OF THE COUNTY OF COOK, A BODY POLITIC AND CORPORATE OF THE STATE OF ILLINOIS, THIS CONTRACT IS  
HEREBY EXECUTED BY:

\_\_\_\_\_  
Cook County Chief Procurement Officer

\_\_\_\_\_  
Date

APPROVED AS TO FORM:

\_\_\_\_\_  
Assistant State's Attorney  
(Required on contracts over \$1,000,000)

\_\_\_\_\_  
Date

**CONTRACT TERM & AMOUNT**

\_\_\_\_\_  
Contract #

\_\_\_\_\_  
Original Contract Term

\_\_\_\_\_  
Renewal Options (If Applicable)

\_\_\_\_\_  
Contract Amount

\_\_\_\_\_  
Cook County Board Approval Date (If Applicable)

