

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 Pickens-Kane Moving & Storage Co.

D/B/A: _____ FEIN # Only: 36-2259540

Street Address: 410 N. Milwaukee

City: Chicago State: IL Zip Code: 60654

Phone No.: 312-942-0330 Fax Number: _____ Email: mmunroe@pickenskane.com

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

Corporate File Number (if applicable): D1868-849-2

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
James P Munroe	[REDACTED]	50%
Michael Munroe Jr	[REDACTED]	50%

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

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

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

Name	Address	Percentage of Beneficial Interest	Relationship

Corporate Officers, Members and Partners Information:

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

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
James P Munroe	[REDACTED]		President
Michael Munroe Jr	[REDACTED]		Chairman

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

MICHAEL F MURPHY JR
Name of Authorized Applicant/Holder Representative (please print or type)

[Signature]
Signature

m.murphy@pickenslane.com
E-mail address

Chairman YSC
Title

3/10/25
Date

312 942 0330
Phone Number

Subscribed to and sworn before me
this 11 day of March, 2025.

My commission expires: 10/18/27

X [Signature]
Notary Public Signature



COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

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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 Healthy Soul Talk PLLC

D/B/A: _____ FEIN # Only: 823619261

Street Address: 1701 S 1st Ave Suite 307

City: Maywood State: IL Zip Code: 60153

Phone No.: 708-483-8455 Fax Number: 708-776-1757

Email: [REDACTED]

Cook County Business Registration Number: _____

(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): 06451454

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
Kimberly Thomas	[REDACTED]	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	N/A	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
N/A			

Declaration (check the applicable box):

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COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Kimberly Thomas

CEO

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

Title

X Kimberly Thomas

X 4-28-25

Signature

Date

[Redacted]

312-714-2381

E-mail address

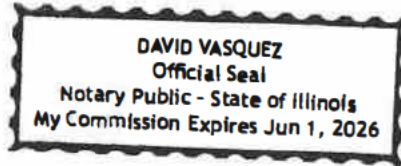
Phone Number

Subscribed to and sworn before me
this 28th day of April, 2025

My commission expires:

X David Vasquez
Notary Public Signature

6-1-26
Notary Seal



COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

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This Statement is an: ☒ Original Statement or ☐ Amended Statement

Identifying Information:

Name Mari Estate LLC

D/B/A: Mari Estate LLC

FEIN # Only: 873137159

Street Address: 1440 West Taylor Street Suite 1973

City: Chicago

State: Illinois

Zip Code: 60607

Phone No.: 312-735-0431

Fax Number: 681-310-0710

Email: info@mari2021estatellc.com

Cook County Business Registration Number: 4482-5587

(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): 11037194

Form of Legal Entity:

☐ Sole Proprietor ☐ Partnership ☐ Corporation ☐ Trustee of Land Trust

☐ Business Trust ☐ Estate ☐ Association ☐ Joint Venture

☒ Other (describe) Limited Liability Company (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
Almario Crawford	[REDACTED]	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
Not Applicable	N/A	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
Not Applicable	N/A	N/A	N/A

Corporate Officers, Members and Partners Information:

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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Almario Crawford	[REDACTED]	Founder, Sole Member, Program Director	10/18/2021 – 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.
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COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

ALMARIO CRAWFORD

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

President

Title

04/24/2025

Date

312 735 0431

Phone Number

Signature

info@mari2021estate/lc.com

E-mail address

Subscribed to and sworn before me
this 24 day of April, 2025

x Maurya Martinez

Notary Public Signature

My Commission Expires



Notary Seal

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This Statement is an: ☒ Original Statement or ☐ Amended Statement

Identifying Information:

Name Convergint Technologies LLC

D/B/A: _____ FEIN # Only: 36-4444620

Street Address: 2000 Center Drive Suite A315

City: Hoffman Estates

State: IL

Zip Code: 60192

Phone No.: 847-620-5000

Fax Number: _____

Email: legal.notices@convergint.com

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

Corporate File Number (if applicable): _____

Form of Legal Entity:

☐ Sole Proprietor ☐ Partnership ☐ Corporation ☐ Trustee of Land Trust

☐ Business Trust ☐ Estate ☐ Association ☐ Joint Venture

☒ Other (describe) Limited Liability Company

Ownership Interest Declaration:

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

Name	Address	Percentage Interest in Applicant/Holder
DG Investment Intermediate Holdings 2, Inc. -	2000 Center Drive Suite A315 Hoffman Estates, IL 60192 -	100% (Parent Company)

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
None		

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Name	Address	Percentage of Beneficial Interest	Relationship
DG Investment Intermediate Holdings 2, Inc.	2000 Center Drive Suite A315 Hoffman Estates, IL 60192	100%	Parent Company

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
Ann Fandozzi	2000 Center Drive Suite A315 Hoffman Estates, IL 601923	Manager	Indefinite
Eric Jacobs	2000 Center Drive Suite A315 Hoffman Estates, IL 60192	Manager	Indefinite
Sean Flint	2000 Center Drive Suite A315 Hoffman Estates, IL 60192	Manager	Indefinite

Declaration (check the applicable box):

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COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Ben Mack

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

Signature

ben.mack@convergint.com

E-mail address

General Manager

Title

08/25/2025

Date

Phone Number

Subscribed to and sworn before me
this 25 day of August, 2025.

My commission expires: 08/15/2028

X

Notary Public Signature

Notary Seal



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This Statement is an: ☒ Original Statement or ☐ Amended Statement

Identifying Information:

Name DG Investment Intermediate Holdings 2, Inc.

D/B/A: _____ FEIN # Only: 90-0881132

Street Address: 2000 Center Drive, Suite A315

City: Hoffman Estates State: IL Zip Code: 60192

Phone No.: 847-620-5000 Fax Number: _____ Email: legal.notices@convergint.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
Convergint Technologies Group Holdings, LLC	N/A	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.

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None		

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Name	Address	Percentage of Beneficial Interest	Relationship
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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
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Eric Jacobs	2000 Center Drive, Suite A315, Hoffman Estates, IL 60192	Director	Indefinite
Sean Flint	2000 Center Drive, Suite A315, Hoffman Estates, IL 60192	Director	Indefinite

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COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

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

[Signature]
Signature

E-mail address

Subscribed to and sworn before me
this 27th day of August, 2025

X [Signature]
Notary Public Signature

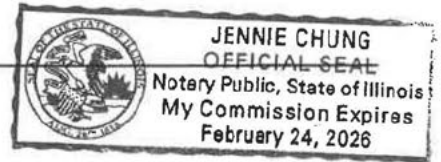
Chief Accounting Officer
Title

08/27/2025
Date

Phone Number

My commission expires: 02/24/2026

Notary Seal



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This Statement is an: ☒ Original Statement or ☐ Amended Statement

Identifying Information:

Name Rising Medical Solutions, LLC

D/B/A: Rising Medical Solutions FEIN # Only: 30-0752433

Street Address: 325 N. LaSalle St, Ste 600

City: Chicago State: IL Zip Code: 60654

Phone No.: 312-559-8445 Fax Number: 312-559-8450 Email: info@risingms.com

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

Corporate File Number (if applicable): N/A

Form of Legal Entity:

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☐ 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
Jason Beans		63.27%
Kimberly Moreland		31.47%
Minh Pham		5.26%

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
Not applicable		

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Name	Address	Percentage of Beneficial Interest	Relationship
Not applicable			

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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Jason Beans, CEO	325 N. LaSalle St., Ste 600, Chicago, IL 60654		Since 2/28/1999

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.
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COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Jason Beans

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

Signature

jason.beans@risingms.com

E-mail address

Subscribed to and sworn before me
this 17th day of Dec, 2024

X Tamara Ann Willis
Notary Public Signature

CEO

Title

12/17/2024

Date

312-559-8445

Phone Number

My commission expires 12-6-26



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. **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 Cook County Suburban Publishers, Inc.

D/B/A: _____ FEIN # Only: 36-2551186

Street Address: 1005 N Seventh St

City: Springfield State: IL Zip Code: 62702

Phone No.: 7734479095 Fax Number: _____ Email: [REDACTED]

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
------	---------	---

see attached list

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
------	---------	-----------------------------------	--------------

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
------	---------	--	----------------

Todd Wessell		President	2 years
--------------	--	-----------	---------

Mark Hornung		Vice President	2 years
--------------	--	----------------	---------

Scott Stone		Treasurer	2 years
-------------	--	-----------	---------

Declaration (check the applicable box):

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

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Susan J. Walker

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

Susan J. Walker

Signature

[Redacted]

E-mail address

Subscribed to and sworn before me this

___18th___ day of ___August___,
2025_.

X *Pilar R. Dazzo*

Notary Public Signature

Assistant Secretary

Title

08.18.25

Date

7734479095

Phone Number

My commission expires:

09/30/2026

OFFICIAL SEAL

PILAR R DAZZO

NOTARY PUBLIC, STATE OF ILLINOIS

MY COMMISSION EXPIRES: 09/30/2026

Notary Seal

COOK COUNTY SUBURBAN PUBLISHERS, INC.

Todd Wessell	President	Journal & Topics	14.28%
Mark Hornung	Vice President	Regional Publishing	14.28%
Scott Stone	Secretary	Daily Herald	14.28%
Jason Hegna	Treasurer	Shaw Publishing	14.28%
Cindy Lysen		SW Messenger	14.28%
Dan Haley		Wednesday Journal	14.28%
Durrell Garth	Chairman	Citizen Group	14.28%

Prepared 8.19.25

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 PATSON INC
D/B/A: TRANSCICAGO TRUCK GROUP FEIN # Only: 36-3198663
Street Address: 776 N YORK ST
City: ELMHURST State: IL Zip Code: 60126
Phone No.: 630-279-0600 Fax Number: _____ Email: DCAYCE@TRANSCICAGO.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
P DOUGLAS CAYCE	LIBERTYVILLE IL	100%

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

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

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

Name	Address	Percentage of Beneficial Interest	Relationship

Corporate Officers, Members and Partners Information:

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

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
P DOUGLAS CAYCE	LIBERTYVILLE IL	PRESIDENT / CEO	CONTINUOUS
ERIC PRATHER	CRYSTAL LAKE IL	SEC/TREAS	CONTINUOUS

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

P DOUGLAS CAYCE

PRESIDENT / CEO

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

Title

Signature

Date

DCAyce@TRANSCHICAGO.COM

630-279-0600

E-mail address

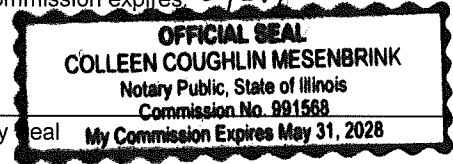
Phone Number

Subscribed to and sworn before me
this 28 day of Aug, 2025

My commission expires: 5/31/2028

x Colleen Coughlin Mesenbrink
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 Morton Salt, Inc.

D/B/A: _____ FEIN # Only: 27-3146174

Street Address: 444 West Lake Street, Suite 2900

City: Chicago State: IL Zip Code: 60606

Phone No.: 312-807-2496 Fax Number: 312-806-9208 Email: bids@mortonsalt.com

Cook County Business Registration Number: not applicable
(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
Morton Investment Company LLC,	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	90%
Morton North America Holdings, LLC	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	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
NONE		

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
NONE			

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 Officers' List			

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.

Attachment A - List of Current Morton Salt, Inc. Officers (Name, Title, Address, Term)**Applicant Morton Salt Inc. Cook County Disclosure Ownership Interest Statement dated August 26, 2025****CONTRACT # 2521-07011**

Officer's Name and Title	Officer's Address	Term of Office
Mark Demetree Chief Executive Officer	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
Mitchell Dascher President, Highway & Chemical	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
James Heard President, Consumer	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
Michael Lenox Senior Vice President and Chief Financial Officer	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
Bradley Bacon Senior Vice President, Chief Administrative Officer, General Counsel and Secretary	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
Jamie Hay Senior Vice President and Chief Human Resources Officer	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
Ken Grimm Vice President, North American Mining Operations	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
Steven Briggs Vice President, US Sales & Marketing	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
Alan Pramann Vice President, Tax	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
Kyle White Treasurer and Vice President, Finance	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
Kari Lowry Vice President, Corporate Controller	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
Anna Fishman Assistant Secretary	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	Last appointed 4/1/2025
Winnie Kuo Assistant Secretary	444 West Lake Street, Suite 2900, Chicago, IL 60606	Last appointed 4/1/2025

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Anthony T. Patton

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

Anthony T. Patton

Signature

apatton@mortonsalt.com

E-mail address

Director, US Gov't Bulk Deicing Sales

Title

26 August, 2025

Date

312-807-2496

Phone Number

Subscribed to and sworn before me
this 26th day of August 2025

X

AD Lorenzini
Notary Public Signature

My commission expires:

2/21/2027



Notary Seal

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

This Statement is an: ☒ Original Statement or ☐ Amended Statement

Identifying Information:

Name Morton Investment Company LLC

D/B/A: _____ FEIN # Only: 90-0475845

Street Address: 40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500

City: Overland Park State: KS Zip Code: 66210

Phone No.: 913-713-0645 Fax Number: n/a Email: bbacon@mortonsalt.com

Cook County Business Registration Number: not applicable
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

☐ Sole Proprietor ☐ Partnership ☐ Corporation ☐ Trustee of Land Trust

☐ Business Trust ☐ Estate ☐ Association ☐ Joint Venture

☒ Other (describe) limited liability company

Ownership Interest Declaration:

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

Name	Address	Percentage Interest in Applicant/Holder
Morton Montana Holdings LLC	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210	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
not applicable		

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.

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not applicable			

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Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Morton Montana Holdings, LLC	40 Corporate Woods, 9401 Indian Creek Parkway, Suite 1500, Overland Park, KS 66210		

Declaration (check the applicable box):

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COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Winnie Kuo

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

Winnie Kuo

Signature

wkuo@mortonsalt.com

E-mail address

Secretary

Title

8/25/2025

Date

312-210-9054

Phone Number

Subscribed to and sworn before me
this 25th day of August, 2025.

My commission expires: 2/21/2027

X

[Signature]

Notary Public Signature

Notary Seal



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This Statement is an: ☒ Original Statement or ☐ Amended Statement

Identifying Information:

Name Finkbiner Equipment Company

D/B/A: _____ FEIN # Only: 36-3962293

Street Address: 15W400 N Frontage Road

City: Burr Ridge State: IL Zip Code: 60527

Phone No.: 630-654-3700 Fax Number: 630-654-3779 Email: _____

Cook County Business Registration Number: None
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): None

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
Timothy J Kraut	2055 S. 108th Street, Milwaukee, WI 53227	34%
Heidi M Johnson	2055 S. 108th Street, Milwaukee, WI 53227	29%
Robert H Kraut	2055 S. 108th Street, Milwaukee, WI 53227	29%
Stephen D Kraut	2055 S. 108th Street, Milwaukee, WI 53227	08%

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.

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N/A		

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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
Timothy Kraut	2055 S. 108th Street, Milwaukee, WI 53227	CEO	2019 Current
Jason Zeibert	15W400 N Frontage Rd. Burr Ridge, IL 60527	President	2017 - Current
Andy Bazan	15W400 N Frontage Rd. Burr Ridge, IL 60527	Vice President	2021 - Current
Clyde Robison	15W400 N Frontage Rd. Burr Ridge, IL 60527	Vice President	2017 - Current

Declaration (check the applicable box):

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COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Timothy J Kraut

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

Timothy J. Kraut

Signature

tkraut@amstate.com

E-mail address

CEO

Title

07/15/2025

Date

Phone Number

Subscribed to and sworn before me
this 15 day of July, 2025

X

S. Satula

Notary Public Signature

My commission expires: 6-10-29

Notary Seal

