AMENDMENT NO. 2

This Amendment modifies Contract No. 2138-18551 for "Professional Construction Management Administrator Services for the Health and Hospitals Portfolio" by and between the County of Cook, Illinois, herein referred to as "County" and Jones Lang LaSalle Americas, Inc., 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 July 28, 2022 (hereinafter referred to as the "Contract"), wherein the Contractor is to provide Professional Construction Management Administrator Services for the Health and Hospitals Portfolio (hereinafter referred to as the "Services") from August 1, 2022 through July 31, 2026, in an amount not to exceed $27,827,960.00, with two (2) one-year renewal options; and

Whereas, Amendment No. 1 was executed by the Chief Procurement Officer on December 31, 2022 to amend Article 2, "Basic Services" of the Contract to incorporate Section 2.0, "Overview"; and

Whereas, the Contract will expire July 31, 2026, 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 Section 4.1.5 of the Contract, the County and Contractor desire to increase the Contract in the amount of $12,548,751.00.

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

1. The Contract is renewed through July 31, 2027.

2. The Contract is increased by $12,548,751.00 and the Total Contract Amount is revised to $40,376,711.00.

3. 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 a part of this Contract.

4. All other terms and conditions remain as stated in the Contract.

Signature page follows

Signature Page

In witness whereof and pursuant to Cook County Board approval, the County and Contractor have caused this Amendment No. 2 to be executed on the date and year last written below.

Jones Lang LaSalle Americas, Inc.

Signature of President or Authorized Representative

Cheryl Carron

Type or Print Name

Chief Operating Officer, Work Dynamics AMR

Title

5/12/2026

Date

Assistant State's Attorney (if applicable – approved as to form)

Brian Tracy

Signature

Brian Tracy

Printed Name

7/29/2026

Date

County of Cook, Illinois

Raffi Sarrafian Digitally signed by Raffi Sarrafian Date: 2026.08.27 13:55:35 -05'00'

Raffi Sarrafian, Chief Procurement Officer

Date

ATTACHMENT A

Identification of Sub-Contractors/Suppliers/Sub-Consultants Form

MBE/WBE Utilization Plan forms

Certificate of Insurance

Economic Disclosures Statement

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

161 N. Clark
Suite 2300
Chicago, Illinois 60601

Memorandum

Date: June 1, 2026

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. 2138-18551 Amendment 2
Professional Construction Management Administrator Services for the Health and Hospitals Portfolio
Department of Capital Planning and Policy
Contractor: Jones Lang LaSalle Americas, Inc.
Original Contract Amount: $27,827,960.00
Original Contract Term: August 1, 2022 – July 31, 2026
Amend Article 2, "Basic Services of the Contract to incorporate Section 2.0 "Overview" with no change to contract value and contract term. (Amendment No. 1)
Increased Contract Value: $12,548,751 and renews the contract term for 1 year (Amendment No. 2)
Revised Contract Value of $40,376,711.00
Revised Contract Term: August 1, 2022 – July 31, 2027
RFP – Professional Services
Contract Goal: 35% MBE/WBE

Dear Mr. Sarrafian:

The Center of Business Enterprise Development is in receipt of the above-reference contract amendment and has reviewed it for compliance with the Minority- and Women- owned Business Enterprises (MBE/WBE) Ordinance. After careful review, it has been determined this amendment is responsive to the Ordinance.

Amendment 2 MWBE Utilization Plan (Based Revised Contract Value $40,376,711)

MWBE Firm	Status	Certifying Agency	Commitment (Direct)
Comprehensive Construction Consulting, Inc.	MBE – AA F	Cook County	3.66%
DSR Group, Inc.	MBE - HA M	City of Chicago	4.64%
Onyx Architectural Services	MBE - AA M	City of Chicago	5.72%
RM Chin & Associates Inc.	WBE - APPI F	City of Chicago	12.53%
Si! Advertising Inc.	MBE - HA F	Cook County	4.31%
SPAAN Tech Inc.	WBE - AAPI F	City of Chicago	8.25%
		Total MWBE:	**39.11%**

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

Amendment 2 increases the contract value by $12,548,751 from $27,827,960.64 to a revised contract value of $40,376,711 renews contract by 1 year from August 1, 2026 through July 31, 2027.

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

JC/mm

CC: Lisa Freelon, (OCPO)
Chealon Shears, (DCPP)

Contract #: 2138-18551 A2

OCPO ONLY:
☐ Disqualification
☐ Check Complete

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

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.: 2138-18551 A2	Date: 5/11/2026
Total Bid or Proposal Amount: $40,850,291	Contract Title: Construction Management Service for the CC Heal
Contractor: Jones Lang LaSalle Americas, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: SPAAN Tech
Authorized Contact for Contractor:	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Smita N Shah
Email Address (Contractor):	Email Address (Subcontractor): smita@spaantech.com
Company Address (Contractor): 200 East Randolph Drive	Company Address (Subcontractor): 311 S wacker Dr Suite 2400
City, State and Zip (Contractor): Chicago, IL 60601	City, State and Zip (Subcontractor): Chicago IL 60606
Telephone and Fax (Contractor): 312-228-3312	Telephone and Fax (Subcontractor): 312-277-8800 312-277-8808
Estimated Start and Completion Dates (Contractor): 8/01/2026 to 7/31/2027	Estimated Start and Completion Dates (Subcontractor): 8/01/2026 to 7/31/2027

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

Description of Services or Supplies	**Total Price of Subcontract for Services or Supplies**
Project and Construction Management Support	3,371,755.33

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.**

Jones Lang LaSalle Americas, Inc.
Contractor

Cheryl Carron
Name

Chief Operating Officer, Work Dynamics AMR
Title

Prime Contractor Signature — Date: 5/12/26

Contract #: 2138-18551 A2

OCPO ONLY:
☐ Disqualification
☐ Check Complete

Cook County
Office of the Chief Procurement Officer
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Bid/RFP/RFQ No.: 2138-18551 A2	Date: 5/11/2026
Total Bid or Proposal Amount: $40,850,291	Contract Title: Construction Management Service for the CC Heal
Contractor: Jones Lang LaSalle Americas, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: RM Chin & Associates, Inc.
Authorized Contact for Contractor:	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Eileen Chin
Email Address (Contractor):	Email Address (Subcontractor): Eileenc@rmchin.com
Company Address (Contractor): 200 East Randolph Drive	Company Address (Subcontractor): 500 W. 18th Street, suite 200
City, State and Zip (Contractor): Chicago, IL 60601	City, State and Zip (Subcontractor): Chicago IL 60616
Telephone and Fax (Contractor): 312-228-3312	Telephone and Fax (Subcontractor): 312-595-2000
Estimated Start and Completion Dates (Contractor): 8/01/2026 to 7/31/2027	Estimated Start and Completion Dates (Subcontractor): 8/01/2026 to 7/31/2027

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

Description of Services or Supplies	**Total Price of Subcontract for Services or Supplies**
Project and Construction Management Support	3,371,755.33

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Jones Lang LaSalle Americas, Inc.
Contractor

Cheryl Carron
Name

Chief Operating Officer, Work Dynamics AMR
Title

Prime Contractor Signature

5/12/26
Date

Contract #: 2138-18551 A2

OCPO ONLY:
☐ Disqualification
☐ Check Complete

Cook County
Office of the Chief Procurement Officer
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Bid/RFP/RFQ No.: 2138-18551 A2	Date: 5/11/2026
Total Bid or Proposal Amount: $40,850,291	Contract Title: Construction Management Service for the CC Heal
Contractor: Jones Lang LaSalle Americas, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: ONYX Architectural Services, Inc
Authorized Contact for Contractor:	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Victor E. Simpkins
Email Address (Contractor):	Email Address (Subcontractor): vsimpkins@onyxchicago.com
Company Address (Contractor): 200 East Randolph Drive	Company Address (Subcontractor): 750 N. Franklin # 207
City, State and Zip (Contractor): Chicago, IL 60601	City, State and Zip (Subcontractor): Chicago IL 60654
Telephone and Fax (Contractor): 312-228-3312	Telephone and Fax (Subcontractor): 312-787-2748
Estimated Start and Completion Dates (Contractor): 8/01/2026 to 7/31/2027	Estimated Start and Completion Dates (Subcontractor): 8/01/2026 to 7/31/2027

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

Description of Services or Supplies	**Total Price of Subcontract for Services or Supplies**
Project and Construction Management Support and design manger service	$2,337,857

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.**

Jones Lang LaSalle Americas, Inc.
Contractor

Cheryl Carron
Name

Chief Operating Officer, Work Dynamics AMR
Title

Prime Contractor Signature

5/12/2026
Date

Contract #: 2138-18551 A2

OCPO ONLY:
☐ Disqualification
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Bid/RFP/RFQ No.: 2138-18551 A2	Date: 5/11/2026
Total Bid or Proposal Amount: $40,850,291	Contract Title: Construction Management Service for the CC Heal
Contractor: Jones Lang LaSalle Americas, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: DSR Group, Inc
Authorized Contact for Contractor:	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Benjamin Reyes
Email Address (Contractor):	Email Address (Subcontractor): reyes1704@gmail.com
Company Address (Contractor): 200 East Randolph Drive	Company Address (Subcontractor): 1440 N. Kingsbury Street#114
City, State and Zip (Contractor): Chicago, IL 60601	City, State and Zip (Subcontractor): Chicago, IL 60642
Telephone and Fax (Contractor): 312-228-3312	Telephone and Fax (Subcontractor): 31-502-5168
Estimated Start and Completion Dates (Contractor): 8/01/2026 to 7/31/2027	Estimated Start and Completion Dates (Subcontractor): 8/01/2026 to 7/31/2027

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

Description of Services or Supplies	**Total Price of Subcontract for Services or Supplies**
Project and Construction Management Support	$1,897,202

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.**

Jones Lang LaSalle Americas, Inc.
Contractor

Cheryl Carron
Name

Chief Operating Officer, Work Dynamics AMR
Title

Prime Contractor Signature

5/12/26
Date

Contract #: 2138-18551 A2

OCPO ONLY:
☐ Disqualification
☐ Check Complete

Cook County
Office of the Chief Procurement Officer
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Bid/RFP/RFQ No.: 2138-18551 A2	Date: 5/11/2026
Total Bid or Proposal Amount: $40,850,291	Contract Title: Construction Management Service for the CC Heal
Contractor: Jones Lang LaSalle Americas, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: Comprehensive Construction Consulting,
Authorized Contact for Contractor:	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Lynn Dixon
Email Address (Contractor):	Email Address (Subcontractor): ldixon@comprehensivescc.com
Company Address (Contractor): 200 East Randolph Drive	Company Address (Subcontractor): 53 W Jackson Blvd#915
City, State and Zip (Contractor): Chicago, IL 60601	City, State and Zip (Subcontractor): Chicago IL
Telephone and Fax (Contractor): 312-228-3312	Telephone and Fax (Subcontractor): 312-353-3003, 312-353-3001
Estimated Start and Completion Dates (Contractor): 8/01/2026 to 7/31/2027	Estimated Start and Completion Dates (Subcontractor): 8/01/2026 to 7/31/2027

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

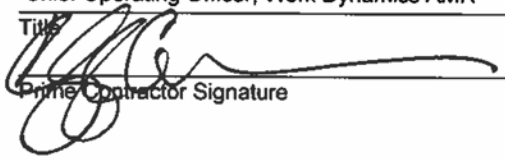
Description of Services or Supplies	**Total Price of Subcontract for Services or Supplies**
Project and Construction Management Support	$1,493,918

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.**

Jones Lang LaSalle Americas, Inc.
Contractor

Cheryl Carron
Name

Chief Operating Officer, Work Dynamics AMR
Title



Prime Contractor Signature

5/12/26
Date

Contract #: 2138-18551 A2

OCPO ONLY:
☐ Disqualification
☐ Check Complete

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

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Bid/RFP/RFQ No.: 2138-18551 A2	Date: 5/11/2026
Total Bid or Proposal Amount: $40,850,291	Contract Title: Construction Management Service for the CC Heal
Contractor: Jones Lang LaSalle Americas, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: Si! Advertising/ Si! Communication
Authorized Contact for Contractor:	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Alejandra Moran
Email Address (Contractor):	Email Address (Subcontractor): sialemoran@gmail.com
Company Address (Contractor): 200 East Randolph Drive	Company Address (Subcontractor): 6637 26th treet
City, State and Zip (Contractor): Chicago, IL 60601	City, State and Zip (Subcontractor): Berwyn IL 60402
Telephone and Fax (Contractor): 312-228-3312	Telephone and Fax (Subcontractor): 708- 715-6495
Estimated Start and Completion Dates (Contractor): 8/01/2026 to 7/31/2027	Estimated Start and Completion Dates (Subcontractor): 8/01/2026 to 7/31/2027

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

Description of Services or Supplies	**Total Price of Subcontract for Services or Supplies**
Communication and related services	$1,761,284

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.**

Jones Lang LaSalle Americas, Inc.
Contractor

Cheryl Carron
Name

Chief Operating Officer, Work Dynamics AMR
Title

Prime Contractor Signature

5/12/26
Date

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

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: Comprehensive Construction Consulting, Inc

Address: 53 W Jackson Blvd #915

E-mail: ldixon@comprehensivescc.com

Contact Person: Lynn Dixon Phone: (312)353-3003

Dollar Amount Participation: $ $1,493,918

Percent Amount of Participation: 3.66 %

*Letter of Intent attached? Yes ☑ No ☐

*Current Letter of Certification attached? Yes ☑ No ☐

MBE/WBE Firm: SPAAN Tech, Inc

Address: 311 S Wacker Dr, Suite 2400, Chicago IL60606

E-mail: submittals@spaantech.com

Contact Person: Smita N. Shah Phone: (312) 277-8800

Dollar Amount Participation: $ 3,371,755.33

Percent Amount of Participation: 8.25 %

*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.**

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

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: R.M.Chin & Associates Inc.

Address: 500 W. 18th Street Sutie, 200, Chicago IL 60616

E-mail: eileenc@rmchin.com

Contact Person: Eileen Chin Phone: (312)595-2000

Dollar Amount Participation: $ $5,118,036

Percent Amount of Participation: 12.53 %

*Letter of Intent attached? Yes ☑ No ☐

*Current Letter of Certification attached? Yes ☑ No ☐

MBE/WBE Firm: ONYX Architectural Services, Inc.

Address: 750N. Franklin #207, Chicago, IL 60654

E-mail: vsimpkins@onyxchicago.com

Contact Person: Victor E. Simpkins Phone: (312) 787-2748

Dollar Amount Participation: $ $2,337,857

Percent Amount of Participation: 5.72 %

*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.**

COOK COUNTY
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Officer

MBE/WBE UTILIZATION PLAN - FORM 1

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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: DSR Group, Inc

Address: 1440 N. Kingsbury St # 114, Chicago IL 60642

E-mail: reyes1704@gmail.com

Contact Person: Benjamin Reyes Phone: (312) 264-0113

Dollar Amount Participation: $ $1,897,202

Percent Amount of Participation: 4.64 %

*Letter of Intent attached? Yes ☑ No ☐

*Current Letter of Certification attached? Yes ☑ No ☐

MBE/WBE Firm: Si! Advertising / Si! Communications

Address: 6637 26th Street, Berwyn IL 60402

E-mail: sialemoran@gmail.com

Contact Person: Alejandra Moran Phone: (708) 715-6495

Dollar Amount Participation: $ $1,761,284

Percent Amount of Participation: 4.31 %

*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.**

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

161 N. Clark Street
Suite 2300
Chicago, Illinois 60601

December 3, 2025

Alejandra Moran
Si! Advertising Inc. DBA Si! Communications
6337 West 26th Street
berwyn, IL 60402

Annual Certification Renewal: January 6, 2027

Dear Ms. Alejandra Moran:

Congratulations on your continued eligibility for certification as a **Minority Business Enterprise (MBE), Women Business Enterprise (WBE)**, by Cook County Government. This certification does not expire; however, you must re-validate your firm's certification annually.

In the past, we have provided annual letters, this practice will no longer continue given that your firm will remain certified indefinitely based on your compliance to programmatic requirements. Please refer to this letter, the Vendor Directory, and your account dashboard for evidence of certification.

As a condition of continued Certification, you must file a **No Change Affidavit** within **ninety (90) calendar days prior** to the date of the annual renewal. Failure to file this affidavit may result in the removal of your Certification. You must notify Business Enterprise Development (BED) of any change in ownership or control or any other matters or facts affecting your firm's eligibility for Certification within **ten (10) calendar days** of such change.

Cook County Government may commence action to remove your firm as a certified vendor if you fail to notify us of any changes of facts affecting your firm's Certification, fails to submit annual renewals, or if your firm otherwise fails to cooperate with the County in any inquiry or investigation. Removal of your status may also be commenced if your firm is found to be involved in bidding or contractual irregularities.

This firm is Certified under the following commodity codes/area(s) of specialty:

NAICS Code:
NAICS 541613: MARKETING CONSULTING SERVICES
NAICS 541810: ADVERTISING AGENCIES
NAICS 541810: ADVERTISING AGENCY CONSULTING SERVICES
NAICS 541820: PUBLIC RELATIONS AGENCIES
NAICS 541840: ADVERTISING MEDIA REPRESENTATIVES (I.E., INDEPENDENT OF MEDIA OWNERS)
NAICS 541850: ADVERTISING SERVICES, INDOOR OR OUTDOOR DISPLAY
NAICS 541850: INDOOR AND OUTDOOR DISPLAY ADVERTISING
NAICS 541910: MARKETING RESEARCH AND PUBLIC OPINION POLLING
NAICS 541910: MARKETING RESEARCH SERVICES
NAICS 541930: TRANSLATION AND INTERPRETATION SERVICES

Your firm's participation on Cook County contracts will be credited toward **Minority Business Enterprise (MBE), Women Business Enterprise (WBE)** goals in your area(s) of specialty. While your participation on Cook County contracts is not limited to your specialty, credit toward **Minority Business Enterprise (MBE), Women Business Enterprise (WBE)** goals will be given only for work done in the specialty category.

To ensure your firm has access to contracting opportunities, you must register on Bonfire at https://cookcountyil.bonfirehub.com/portal/?tab=openOpportunities.

Thank you for your continued interest in Cook County Government's Minority, Women, Veteran, Service-Disabled Veteran, and Persons with Disabilities Business Enterprise Programs.

Sincerely,

Business Enterprise Development
Certification Division
https://cookcountyil.gov/service/business-enterprise-development-certification

CITY OF CHICAGO

DEPARTMENT OF PROCUREMENT SERVICES

August 19, 2025

Eileen Chin
R.M. Chin & Associates Inc.
500 W 18TH ST STE 200
CHICAGO, IL 60616

RE: CONTINUATION OF CERTIFICATION

Dear Ms. Chin:

We are pleased to inform you that **R.M. Chin & Associates Inc.** continues to be certified as a **Minority-Owned Business Enterprise ("MBE") and as a Women-Owned Business Enterprise ("WBE")** by the City of Chicago ("City"). This recertification is a continuation of your previous certification which will expire **September 1, 2025** 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 September 1st.**

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 September 1st.** 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/WBE** 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, 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):
NAICS 237110: CONSTRUCTION MANAGEMENT, WATER AND SEWAGE TREATMENT PLANT
NAICS 237110: CONSTRUCTION MANAGEMENT, WATER AND SEWER LINE
NAICS 237130: CONSTRUCTION MANAGEMENT, POWER AND COMMUNICATION TRANSMISSION LINE
NAICS 237310: CONSTRUCTION MANAGEMENT, HIGHWAY, ROAD, STREET AND BRIDGE
NAICS 237990: CONSTRUCTION MANAGEMENT, DAM
NAICS 237990: CONSTRUCTION MANAGEMENT, MARINE STRUCTURE
NAICS 237990: CONSTRUCTION MANAGEMENT, MASS TRANSIT
NAICS 237990: CONSTRUCTION MANAGEMENT, OUTDOOR RECREATION FACILITY
NAICS 237990: CONSTRUCTION MANAGEMENT, TUNNEL
NAICS 485113: BUS AND OTHER MOTOR VEHICLE TRANSIT SYSTEMS
NAICS 485119: OTHER URBAN TRANSIT SYSTEMS
NAICS 541330: ENGINEERING SERVICES
NAICS 541340: DRAFTING SERVICES
NAICS 541350: BUILDING INSPECTION SERVICES
NAICS 541350: HOME INSPECTION SERVICES
NAICS 541511: COMPUTER SOFTWARE ANALYSIS AND DESIGN SERVICES, CUSTOM
NAICS 541512: COMPUTER HARDWARE CONSULTING SERVICES OR CONSULTANTS
NAICS 541512: COMPUTER SOFTWARE CONSULTING SERVICES OR CONSULTANTS
NAICS 541519: SOFTWARE INSTALLATION SERVICES, COMPUTER
NAICS 541611: GENERAL MANAGEMENT CONSULTING SERVICES
NAICS 541611: STRATEGIC PLANNING CONSULTING SERVICES
NAICS 541620: ENVIRONMENTAL CONSULTING SERVICES
NAICS 541690: SAFETY CONSULTING SERVICES
NAICS 541690: SECURITY CONSULTING SERVICES
NAICS 541820: PUBLIC RELATIONS CONSULTING SERVICES

Your firm's participation on City contracts will be credited only toward **MBE/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.

The Office of Contracting Equity

CITY OF CHICAGO

DEPARTMENT OF PROCUREMENT SERVICES

AUG 1 3 2024

Victor Simpkins
Onyx Architecture Services, Inc.
750 North Franklin Suite 207
Chicago, IL 60654

RE: CONTINUATION OF CERTIFICATION

Dear Mr. Simpkins

We are pleased to inform you that **Onyx Architecture Services, Inc.** 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 **June 15, 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 June 15th.**

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 June 15th.** 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, 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):

236220 – Construction Management Commercial/Institutional
236116 – Construction Management Multifamily Residences
236115 – Construction Management Single Family Residences
541410 – Interior Design Services
541310 – Architectural 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/ejm

CITY OF CHICAGO

DEPARTMENT OF PROCUREMENT SERVICES

MAR 1 2 2024

Benjamin Reyes
DSR Group, Inc.
1440 N. Kingsbury Street, Suite 114
Chicago, IL 60642

RE: CONTINUATION OF CERTIFICATION

Dear Mr. Reyes:

We are pleased to inform you that **DSR Group, Inc.** 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 **March 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 March 1st**.

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 March 1st.** 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; or

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, 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):
236115 – Construction Management, Single-Family Building
236116 – Construction Management, Multi-Family Building
236118 – Construction Management, Residential Remodeling
236210 – Construction Management, Industrial Building (except warehouses)
236220 – Construction Management, Commercial and Instructional Building

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/etm

B2Gnow Certified Profile

CLOSE WINDOW

Print

Business & Contact Information

BUSINESS NAME	**SPAAN Tech, Inc.,** DBA **N/A**
B2G VENDOR ID (VID)	**20018501**
OWNER	**Smita N. Shah**
ADDRESS	**311 S. Wacker Dr. - Suite 3200** **Chicago, IL 60606** [map]
PHONE	**312-277-8800**
EMAIL	submittals@spaantech.com
WEBSITE	http://www.spaantech.com
ETHNICITY	**Asian American**

Certification Information

CERTIFYING AGENCY	**City of Chicago**
CERTIFICATION TYPE	**MBE - Minority Business Enterprise**
CERTIFICATION DATE	**4/2/2026**
RENEWAL DATE	**7/1/2027**
EXPIRATION DATE	**7/1/2029**
CERTIFIED BUSINESS DESCRIPTION	**541310 Architectural Services** **541330 Engineering Services** **541340 Drafting Service** **541350 Inspection Services, Building or Home** **541370 Surveying and Mapping (except Geophysical) Services** **541512 Computer Systems Design Services** **541513 Computer Facilities Management Services** **541519 Other Computer Related Services** **541611 Administrative Management and General Management Consulting Services** **541618 Other Management Consulting Services** **541690 Other Scientific and Technical Consulting Services** **561110 Office Administrative Services** **561210 Facilities Support Services**

Commodity Codes

Code	Description
NAICS 541310	Architectural Services
NAICS 541330	Engineering services
NAICS 541340	Drafting services
NAICS 541350	Inspection services, building or home
NAICS 541370	Surveying and Mapping (except Geophysical) Services
NAICS 541512	Computer Systems Design Services
NAICS 541513	Computer Facilities Management Services
NAICS 541519	Other Computer Related Services
NAICS 541611	Administrative Management and General Management Consulting Services
NAICS 541618	Other Management Consulting Services
NAICS 541690	Other Scientific and Technical Consulting Services
NAICS 561110	Office Administrative Services
NAICS 561210	Facilities Support Services

Additional Information

WARD	**34**
COMMUNITY AREA	**32 Loop**
QUALIFIED INVESTMENT AREA	**No**

B2GNOW

This B2Gnow certified profile was generated on 5/7/2026

Certification: View

Certification List | Submit Change Request | View Letters & Certificates | Add Date Alert

Vendor Information

BUSINESS NAME	**DSR Group, Inc.**
SYSTEM VENDOR NUMBER	**20069168**
PRIMARY OWNER'S NAME	**Mr. Benjamin Reyes**
ETHNIC GROUP	**Hispanic/Latino**
GENDER	**Male**

Certification Information

CERTIFYING AGENCY	**City of Chicago**
CERTIFICATION TYPE	**MBE - Minority Business Enterprise**
EFFECTIVE DATE	**12/31/2025**
RENEWAL DATE	**3/1/2027**

Contact Information

MAIN COMPANY EMAIL	**reyes1704@gmail.com**
MAIN PHONE	**312-988-4677**
MAIN FAX	**312-264-0113**
MAIN COMPANY WEBSITE	**http://dsr-chicago.com**

Addresses

PHYSICAL ADDRESS	**1440 N. Kingsbury Street, Suite 114** **Chicago, IL 60642** [map]
MAILING ADDRESS	**1440 N. Kingsbury Street, Suite 114** **Chicago, IL 60642** [map]

Business Capabilities

BUSINESS CERTIFIED FOR	**236115 Construction management, single-family building** **236116 Construction management, multifamily building** **236118 Construction management, residential remodeling** **236210 Construction management, industrial building (except warehouses)** **236220 Construction management, commercial and institutional building**
FULL DESCRIPTION OF CAPABILITIES/PRODUCTS	**236115 Construction management, single-family building** **236116 Construction management, multifamily building** **236118 Construction management, residential remodeling** **236210 Construction management, industrial building (except warehouses)** **236220 Construction management, commercial and institutional building**

COMMODITY CODES

NAICS 236115	**Construction management, single-family building** (More)
NAICS 236116	**Construction management, multifamily building** (More)
NAICS 236118	**Construction management, residential remodeling** (More)
NAICS 236210	**Construction management, industrial building (except warehouses)** (More)
NAICS 236220	**Construction management, commercial and institutional building** (More)

Owner Ethnicity and Gender

ETHNIC GROUP	**Hispanic/Latino**
GENDER	**Male**
DBE ETHNIC GROUP	**Hispanic American**

Location

COUNTY	**Cook (IL)**

Additional Information

WARD	**27**
COMMUNITY AREA	**8 Near North Side**
QUALIFIED INVESTMENT AREA	**No**

Letters & Certificates

View	Letter Type	Format	Date Sent	Viewed In System By Vendor
View	Approval ltr	Email	3/12/2024	-

Certification List

This profile was generated on 5/10/2026

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COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: Si Advertising/Communications Certifying Agency: Cook County

Contact Person: Alejandra Moran

Certification Expiration Date: _____

Address: 6337 26th St

Ethnicity: Hispanic

City/State: Berwyn IL Zip: 60402

Bid/Proposal/Contract #: 213-18551 A2

Phone: 708-715-6495 Fax: _____

FEIN #: 36-4098839

Email: sialemorna@gmail.com

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)*

Services relating to 541611 General Management consulting services

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

Extended proposed contract value $1,761,284, percentage 4.31%,Payment terms Net 0 after receiving funds at JLL

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 (*M/WBE*)

Alejandra Moran President

Print Name : Alejandra Moran

Firm Name : Si Advertising/Communications

Date 5/12/2026

Subscribed and sworn before me

this 12 day of May, 2026

Notary Public Nancy A Buchler

SEAL

OFFICIAL SEAL
NANCY A BUCHLER
Notary Public - State of Illinois
Commission No. 825031
My Commission Expires August 25, 2027

Signature (*Prime Bidder/Proposer*)

Cheryl Carron

Print Name

Firm Name: JLL

Date 5/12/2026

Subscribed and sworn before me

this 12 day of May, 2025

Notary Public Dolores Elizabeth Spencer

SEAL

Official Seal
DOLORES ELIZABETH SPENCER
Notary Public, State of Illinois
Commission No. 993676
My Commission Expires July 16, 2028

Revised: 12/4/24

MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: Comprehensive Construction Consulting, Inc.

Certifying Agency: Cook County

Contact Person: Lynn Dixon

Certification Expiration Date: August 4, 2026

Address: 53 W Jackson Blvd #915

Ethnicity: African American

City/State: Chicago/IL Zip: 60604

Bid/Proposal/Contract #: 2138-18551 A2

Phone: 312/353-3003 Fax: 312/353-3001

FEIN #: 20-8717661

Email: ldixon@comprehensivecc.cm

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)*

Services relating to 541611General Management Consulting Services

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

Extended proposed contract value $1,493,918 percentage 3.66%. payment terms Net 0 after receiving funds at JLL.

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 (*M/WBE*)

Lynn Dixon

Print Name

Comprehensive Construction Consulting, Inc

Firm Name

May 11, 2026

Date

Subscribed and sworn before me

this 11 day of May, 2026.

Notary Public Jenelle Taylor

SEAL

Jenelle R. Taylor
Notary Public, State of Indiana
Lake County
Commission Number NP0763240
My Commission Expires
May 2, 2033

Signature (*Prime Bidder/Proposer*)

Cheryl Carron

Print Name

JLL

Firm Name

5/12/2026

Date

Subscribed and sworn before me

this 12 day of May, 2025.

Notary Public Dolores Elizabeth Spencer

SEAL

Official Seal
DOLORES ELIZABETH SPENCER
Notary Public, State of Illinois
Commission No. 993676
My Commission Expires July 16, 2028

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: DSR Group Inc
Certifying Agency: City of Chicago
Contact Person: Benjamin Reyes
Certification Expiration Date:
Address: 1440 N. Kingsbury St #114
Ethnicity: Hispanic
City/State: Chicago IL Zip: 60642
Bid/Proposal/Contract #: 213-18551 A2
Phone: 312-264-0113 Fax:
FEIN #: 36-4480147

Email: reyes1704@gmail.com

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)*

Services relating to 541611 General Management consulting services

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

Extended proposed contract value $1,897,202, percentage 4.64%,Payment terms Net 0 after receiving funds at JLL

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 (M/WBE)
Benjamin Reyes
Print Name : Benjamin Reyes
DSR Group
Firm Name : DSR Group
May 11, 2026
Date

Subscribed and sworn before me
this 11 day of May, 2026
Notary Public L. S. Garcia
SEAL

L S GARCIA
Official Seal
Notary Public - State of Illinois
My Commission Expires Nov 24, 2026

Signature (Prime Bidder/Proposer)
Cheryl Carron
Print Name
JLL
Firm Name
5/12/2026
Date

Subscribed and sworn before me
this 12 day of May, 2025.
Notary Public Dolores Elizabeth Spencer
SEAL

Official Seal
DOLORES ELIZABETH SPENCER
Notary Public, State of Illinois
Commission No. 993676
My Commission Expires July 16, 2028

Revised: 12/4/24

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

M/BE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm ONYX Architectural Services, Inc Certifying Agency: City of Chicago

Contact Person: Victor E Simpkins

Certification Expiration Date: _____

Ethnicity: African American

Address: 750 N. Franklin # 207

City/State: Chicago IL Zip: 60654 Bid/Proposal/Contract #: 213-18551 A2

Phone: 312-787-2748 Fax: _____ FEIN #: 36-4184723

Email: vsimpkins@onyxchicago.com

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)*

Services relating to 541611 General Management consulting services

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

Extended proposed contract value $ $2,337,857, percentage 5.72%, Payment terms Net 0 after receiving funds at JLL

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.

Victor E. Simpkins
Signature (M/WBE)

Print Name : Victor E Simpkins

Firm Name :ONYX Architectural Services, Inc

5/11/2026
Date

Subscribed and sworn before me

this 11 day of May, 2026

Notary Public

SEAL

Notary Public, State of Illinois
Official Seal
Tangela Darlene Simona Hudson
Commission # 1000252
My Commission Expires 11/19/2028

Signature (Prime Bidder/Proposer)
Cheryl Carron

Print Name

JLL

Firm Name

5/12/2026
Date

Subscribed and sworn before me

this 12 day of May, 2025

Notary Public Dolores Elizabeth Spencer

SEAL

Official Seal
DOLORES ELIZABETH SPENCER
Notary Public, State of Illinois
Commission No. 993676
My Commission Expires July 16, 2028

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: R.M.Ch in & A s sates, I nc.
Eileen Chin
Contact Person:
Address: 500 West 18th Street, suite 200
City/State: Chiciago IL Zip: 60616
Phone: 312-595-2000 Fax: 312-644-09999
Email: eileenc@rmchin.com

Certifying Agency: City of Chicago Department of procurement Services
Certification Expiration Date:
Ethnicity: Asian
Bid/Proposal/Contract #: 2138-18 55I A2
FEIN #: 2138-18 551 A2

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)*

Services relating to 541611 General Management consulting services

Indicate the **Dollar Amount, Percentage,** and the **Terms of Payment** for the above-described Commodities/ Services:
Extended proposed contract value $5,118,036, percentage 12.53%, Payment terms Net 0 after receiving funds at JLL.

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 Contr actor, 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 co mpleted.

Signature (M/WBE)	Signature (Prime Bidder/Proposer)
Eileen Chin	Cheryl Carron
Print Name	Print Name
R.M.Chin & Associates Inc.	JLL
Firm Name	Firm Name
May 11, 2026	5/12/2026
Date	Date
Subscribed and swom before me	Subscribed and swom before me
this 11th day of MAY 2026.	this 12 day of May, 2025
Notary Public Janice Scott	Notary Public Dolores Elizabeth Spencer
SEAL	SEAL

JANICE SCOTT
Official Seal
Notary Public - State of Illinois
My Commission Expires Aug 25, 2026

Official Seal
DOLORES ELIZABETH SPENCER
Notary Public, State of Illinois
Commission No. 993676
My Commission Expires July 16, 2028

Revised: 12/4/24

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: SPAAN Tech, Inc
Contact Person: Smita N. Shah
Address: 311 S Wacker Dr, Suite 3200
City/State: Chicago, IL Zip: 60606
Phone: 312-277-8800 Fax: _____
Email: _____

Certifying Agency: City of Chicago Department of procurement Services
Certification Expiration Date: _____
Ethnicity: _____
Bid/Proposal/Contract #: 213-18551 A2
FEIN #: _____

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)*

541611 Administrative Management and General Management Consulting Services

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

Extended proposed contract value $3,371,755.33, percentage 8.25%, Payment terms Net 0 after receiving funds at JLL

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 (M/WBE)
Smita N. Shah
Print Name
SPAAN Tech, Inc.
Firm Name
5/11/26
Date

Subscribed and sworn before me
this 11 day of May, 2026.
Notary Public Bridget McLaughlin

SEAL

BRIDGET MCLAUGHLIN
Official Seal
Notary Public - State of Illinois
My Commission Expires Jun 8, 2026

Signature (Prime Bidder/Proposer)
Cheryl Carron
Print Name
JLL
Firm Name
5/12/2026
Date

Subscribed and sworn before me
this 12 day of May, 2025
Notary Public Dolores Elizabeth Spencer

SEAL

Official Seal
DOLORES ELIZABETH SPENCER
Notary Public, State of Illinois
Commission No. 993676
My Commission Expires July 16, 2028

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
05/12/2026

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 rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Aon Risk Services Northeast, Inc.
New Jersey Office
200 Connell Drive
Fifth Floor
Berkeley Heights NJ 07922 USA

CONTACT NAME:
PHONE (A/C. No. Ext): (866) 283-7122
FAX (A/C. No.): 800-363-0105
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Lexington Insurance Company	19437
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
Jones Lang LaSalle Americas, Inc.
200 East Randolph Drive
Chicago IL 60601 USA

COVERAGES **CERTIFICATE NUMBER:** 570119939694 **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.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	
	☐ CLAIMS-MADE ☐ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	
							MED EXP (Any one person)	
							PERSONAL & ADV INJURY	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	
	☐ POLICY ☐ PRO-JECT ☐ LOC						PRODUCTS - COMP/OP AGG	
	OTHER:							
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	
	☐ ANY AUTO						BODILY INJURY (Per person)	
	☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS						BODILY INJURY (Per accident)	
	☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	
	☐ UMBRELLA LIAB ☐ OCCUR						EACH OCCURRENCE	
	☐ EXCESS LIAB ☐ CLAIMS-MADE						AGGREGATE	
	☐ DED ☐ RETENTION							
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						☐ PER STATUTE ☐ OTH-ER	
	ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ N / A						E.L. EACH ACCIDENT	
	(Mandatory in NH)						E.L. DISEASE-EA EMPLOYEE	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE-POLICY LIMIT	
A	E&O - Professional Liability - Primary			016514592 Claims Made SIR applies per policy terms & conditions	04/01/2026	04/01/2027	Each Claim Annual Aggregate	$2,000,000 $2,000,000

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

The Professional Liability policy includes Cyber Liability. The limits as described above attach over Self-Insured Retentions held by Jones Lang LaSalle. RE: Cook County Health and Hospital Portfolio.

CERTIFICATE HOLDER

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

CANCELLATION

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

Aon Risk Services Northeast, Inc.

Holder Identifier :

Certificate No : 570119939694

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CERTIFICATE OF LIABILITY INSURANCE

1/1/2027

DATE (MM/DD/YYYY): 5/12/2026

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 rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Lockton Companies, LLC DBA Lockton Insurance Brokers, LLC in CA CA license #0F15767 1185 Avenue of the Americas, Ste. 2010 New York NY 10036 (646) 572-7300	**CONTACT NAME:** JLL Certificate Requests **PHONE (A/C, No, Ext):** **FAX (A/C, No):** **E-MAIL ADDRESS:** JLLcertrequests@lockton.com
INSURED 1342065 Jones Lang LaSalle Americas, Inc. 200 E. Randolph Drive Chicago IL 60601	**INSURER(S) AFFORDING COVERAGE** / **NAIC #** **INSURER A :** American Zurich Insurance Company — 40142 **INSURER B :** Zurich American Insurance Company — 16535 **INSURER C :** **INSURER D :** **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** 18709645 **REVISION NUMBER:** XXXXXXX

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☐ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PRO-JECT ☐ LOC ☐ OTHER:			NOT APPLICABLE			EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG $	$ XXXXXXX $ XXXXXXX $ XXXXXXX $ XXXXXXX $ XXXXXXX $ XXXXXXX $
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY			NOT APPLICABLE			COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) $	$ XXXXXXX $ XXXXXXX $ XXXXXXX $ XXXXXXX $ XXXXXXX
	UMBRELLA LIAB ☐ OCCUR **EXCESS LIAB** ☐ CLAIMS-MADE ☐ DED ☐ RETENTION $			NOT APPLICABLE			EACH OCCURRENCE AGGREGATE $	$ XXXXXXX $ XXXXXXX $ XXXXXXX
A B B	**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY** ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N: N **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	N / A	Y	WC 5096393 01 (AOS) WC 5096394 01(PR Emp Liab) WC 5096394 01 (MA/WI)	1/1/2026 1/1/2026 1/1/2026	1/1/2027 1/1/2027 1/1/2027	X PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ 1,000,000 $ 1,000,000 $ 1,000,000

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

THIS CERTIFICATE SUPERSEDES ALL PREVIOUSLY ISSUED CERTIFICATES FOR THIS HOLDER, APPLICABLE TO THE CARRIERS LISTED AND THE POLICY TERM(S) REFERENCED.

Worker's Comp Deductible: $500,000 Re: Cook County Health and Hospital Portfolio.

A waiver of subrogation applies per written contract.

CERTIFICATE HOLDER

18709645
Cook County
118 N. Clark Street, Room 1018
Chicago, IL 60602

CANCELLATION

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

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 06/25/2026

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 rights to the certificate holder in lieu of such endorsement(s).

PRODUCER MARSH USA, LLC. 1166 Avenue of the Americas New York, NY 10036 CN102841098-Corp-GAU-25-26	**CONTACT NAME:** **PHONE (A/C, No, Ext):** **FAX (A/C, No):** **E-MAIL ADDRESS:**
INSURED Jones Lang LaSalle Americas, Inc. c/o Risk Management 200 East Randolph Drive Chicago, IL 60601	**INSURER(S) AFFORDING COVERAGE** — **NAIC #** **INSURER A :** Endurance Assurance Corporation — 11551 **INSURER B :** Endurance American Insurance Company — 10641 **INSURER C :** Sompo America Insurance Company — 11126 **INSURER D :** American Guarantee and Liability Company — 26247 **INSURER E :** **INSURER F :**

COVERAGES **CERTIFICATE NUMBER:** NYC-011966988-15 **REVISION NUMBER:** 12

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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	X **COMMERCIAL GENERAL LIABILITY**	Y	Y	GGP30000018905	11/15/2025	11/15/2026	EACH OCCURRENCE	$	2,000,000
B	[ ] CLAIMS-MADE [X] OCCUR			EXC30073135901	11/15/2025	11/15/2026	DAMAGE TO RENTED PREMISES (Ea occurrence)	$	1,000,000
							MED EXP (Any one person)	$	10,000
							PERSONAL & ADV INJURY	$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$	4,000,000
	[ ] POLICY [ ] PRO-JECT [X] LOC						PRODUCTS - COMP/OP AGG	$	4,000,000
	[ ] OTHER:						GL Buffer	$	$2M/$4M
C	**AUTOMOBILE LIABILITY**	Y	Y	GAR30012852804	11/15/2025	11/15/2026	COMBINED SINGLE LIMIT (Ea accident)	$	3,000,000
	[X] ANY AUTO						BODILY INJURY (Per person)	$	
	[ ] OWNED AUTOS ONLY [ ] SCHEDULED AUTOS						BODILY INJURY (Per accident)	$	
	[X] HIRED AUTOS ONLY [X] NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$	
								$	
D	X **UMBRELLA LIAB** [X] OCCUR			AUC 5944289-17	11/15/2025	11/15/2026	EACH OCCURRENCE	$	2,000,000
	[ ] **EXCESS LIAB** [ ] CLAIMS-MADE						AGGREGATE	$	2,000,000
	[ ] DED [ ] RETENTION $							$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						[ ] PER STATUTE [ ] OTH-ER		
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? [N] **(Mandatory in NH)**	N / A					E.L. EACH ACCIDENT	$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$	
							E.L. DISEASE - POLICY LIMIT	$	

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

Re: Cook County Health and Hospital Portfolio

Additional Insured (Liability) where required by written contract: Cook County. This insurance is primary and non-contributory over any existing insurance and limited to liability arising out of the operations of the named insured and where required by written contract. Waiver of subrogation is applicable where required by written contract.

CERTIFICATE HOLDER

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

CANCELLATION

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

Marsh USA LLC

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COOK COUNTY
ECONOMIC DISCLOSURE STATEMENT
AND EXECUTION DOCUMENT
INDEX

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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.

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 sub-paragraphs (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.

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

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

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

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

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

1) Not-For Profit Organizations (defined as a corporation having tax exempt status under Section 501(C)(3) of the United 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:

200 East Riverside Plaza, Chicago IL 60601

150 North Riverside Plaza, Suite 2500, Chicago IL 60606

8755 West Higgins Road, 7th Floor Chicago IL 60631

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): _____

_____

_____

(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:

4b) Based on the information currently known to the signor after reasonably diligent inquiry the answer is "no." We will continue to complete further research and supplement our response with any additional information discovered.

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 Jones Lang LaSalle Americas, Inc.

D/B/A: _____ FEIN # Only: 36-4160760

Street Address: 200 East Randolph Drive

City: Chicago State: IL Zip Code: 60601

Phone No.: 312-782-5800 Fax Number: 312-782-4339 Email: PIRegistrations@am.jll.com

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

Corporate File Number (if applicable): 59440004

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
Jones Lang LaSalle Americas, Inc.	200 East Randolph Drive, 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

3. Is the Applicant constructively controlled by another person or Legal Entity? [☐] Yes [☑] No

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

Name	Address	Percentage of Beneficial Interest	Relationship

Corporate Officers, Members and Partners Information:

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

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

Declaration (check the applicable box):

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

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

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

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

Chief Operating Officer, Work Dynamics AMR
Title

Signature

5/12/26
Date

PIRegistrations@am.jll.com
E-mail address

312-782-5800
Phone Number

Subscribed to and sworn before me
this 12 day of May, 2025

My commission expires:

x Dolores Elizabeth Spencer
Notary Public Signature

July 16, 2028
Notary Seal

Official Seal
DOLORES ELIZABETH SPENCER
Notary Public, State of Illinois
Commission No. 993676
My Commission Expires July 16, 2028

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:

☐ Parent	☐ Grandparent	☐ Stepfather
☐ Child	☐ Grandchild	☐ Stepmother
☐ Brother	☐ Father-in-law	☐ Stepson
☐ Sister	☐ Mother-in-law	☐ Stepdaughter
☐ Aunt	☐ Son-in-law	☐ Stepbrother
☐ Uncle	☐ Daughter-in-law	☐ Stepsister
☐ Niece	☐ Brother-in-law	☐ Half-brother
☐ Nephew	☐ Sister-in-law	☐ Half-sister

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: Jones Lang LaSalle Americas, Inc.

Address of Person Doing Business with the County: 200 East Randolph Drive, Chicago, IL 60601

Phone number of Person Doing Business with the County: 312-782-5800

Email address of Person Doing Business with the County: PIRegisrations@am.jll.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:

Joseph Folliard, Project Director, Joseph.Folliard@stvinc.com, 312-339-1428

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 proceeding 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: 2138-18551

The aggregate dollar value of the business you are doing or seeking to do with the County: $ 40,376,711.00

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: Lisa Freelon, Lead Contract Negotiator

lisa.freelon@cookcountyil.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:

Eric Davis, Deputy Director, Bureau of Asset Management, Department of Capital Planning & Policy, eric.davis@cookcountyil.gov, 312 599 2877

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*
N/A			

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*
N/A			

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*
N/A			

Name of Person Responsible for the General Administration of the Business Entity Doing Business with the County

N/A

Name of Agent Authorized to Execute Documents for Business Entity Doing Business with the County

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: 2138-18551 A2

County Using Agency (requesting Procurement): Office of the Chief Procurement Office

II. Person/Substantial Owner Information:

Person (Corporate Entity Name): Jones Lang LaSalle Americas, Inc.

Substantial Owner Complete Name: Jones Lang LaSalle Incorporated

FEIN# 36-4160760

[redacted] E-mail address: PIRegistrations@am.jll.com

Street Address: 200 East Randolph Drive

City: Chicago State: IL Zip: 60601

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

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: 5/12/2026

Name of Person signing (Print): Cheryl Carron Title: COO

Subscribed and sworn to before me this 12 day of May, 2026

X Dolores Elizabeth Spencer Expires July 16, 2028

Notary Public Signature **Notary Seal**

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

Official Seal
DOLORES ELIZABETH SPENCER
Notary Public, State of Illinois
Commission No. 993676
My Commission Expires July 16, 2028

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

Jones Lang LaSalle Americas, Inc.
Corporation's Name

CHERYL CARRON
President's Printed Name and Signature

312-782-5800
Telephone

PIRegistrations@am.jll.com
Email

Secretary Signature

5/12/26
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
12 day of May, 2026

Official Seal
DOLORES ELIZABETH SPENCER
Notary Public, State of Illinois
Commission No. 993676
My Commission Expires July 16, 2028

Dolores Elizabeth Spencer
Notary Public Signature

My commission expires:
July 16, 2026
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)