STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Richard Bennett Filing for Calendar Year: 2018

Mailing Address: 230 Meadowbrook DR Bloomington, IL 61701
Full post office address including city and zip code

Home Address: 230 Meadowbrook DR Bloomington, IL 61701
Full address including city and zip code

Position(s): County Board Member McLean County
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS
DEC 01 2017
Kathy Michael
COUNTY CLERK

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/A		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

iMobile USA

Complete and sign on reverse ➤➤➤

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Nov. 26, 2018

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: JEREMY BRADLEY Filing for Calendar Year: 2018

Mailing Address: 3 BROMPTON COURT BLOOMINGTON 61704
Full post office address including city and zip code

Home Address: 3 BROMPTON COURT BLOOMINGTON 61704
Full address including city and zip code

Position(s): COUNTY BOARD DISTRICT 9 MCLEAN COUNTY
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS
NOV 28 2017
Kathy Michael
COUNTY CLERK

Please check one of the following: ☑ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
NA		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
NA		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

NA

Complete and sign on reverse ➤➤➤

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

NA

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

NA

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

NA

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

NA

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

NA

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

11/2017

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Sharon Chung Filing for Calendar Year: 2017

Mailing Address: 3 Dawes Pl., Bloomington IL 61701
Full post office address including city and zip code

Home Address: 3 Dawes Pl., Bloomington IL 61701
Full address including city and zip code

Position(s): County Board Member McLean County
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

FILED
McLEAN COUNTY, ILLINOIS
DEC 04 2017
COUNTY CLERK

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/A	N/A	N/A

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A	N/A	N/A

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

12/3/17

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Paul Michal Emerson Filing for Calendar Year: 2018

Mailing Address: 14900 E 275 N RD
Full post office address including city and zip code

Home Address: 14900 E 275 N Rd
Full address including city and zip code

Position(s): County Board District 2 County
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS
DEC 01 2017
Kathy Michael
COUNTY CLERK

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/A	N/A	N/A

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A	N/A	N/A

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

11-30-17

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Alexandra Engle Filing for Calendar Year: 2018

Mailing Address: 9 Trader Circle Apt 1161 Normal, IL 61761
Full post office address including city and zip code

Home Address: 9 Trader Circle Apt 1161 Normal, IL 61761
Full address including city and zip code

Position(s): County Board District 4 County
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS
DEC 01 2017
Kathy Michael
COUNTY CLERK

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

Please check one of the following: ☑ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

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Business Entity	Instrument of Ownership	Position of Management
N/A	N/A	N/A

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A	N/A	N/A

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

Illinois State University

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

11/30/17

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Chuck Erickson Filing for Calendar Year:

Mailing Address: 3117 Eagle Creek Drive, Bloomington, IL 61704
Full post office address including city and zip code

Home Address: 3117 Eagle Creek Drive, Bloomington, IL 61704
Full address including city and zip code

Position(s): McLean County Board District 10 Board Member McLean County
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

NOV 27 2017

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

Kathy Michael
COUNTY CLERK

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

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Business Entity	Instrument of Ownership	Position of Management
Not Applicable		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
Charles N. Erickson Law Office		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

Legal advice and representation. To the best of my knowledge and belief I have no clients from which I ~~received~~ have received $5000 or more who conducted business with the McLean County Government. ONE

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

Not applicable.

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

Not applicable.

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

Not applicable

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

I received payments for my services as a representative on the McLean County Board, District 10, McLean County, Illinois

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

Not applicable

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

FILED
McLEAN COUNTY, ILLINOIS

NOV 27 2017

Kathy Michael
COUNTY CLERK

Charles Dickson Nov. 18, 2017
(Signature of Person Making the Statement) (Date)

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: LEX GREEN Filing for Calendar Year: 2017

Mailing Address: 2707 CROOKED CREEK RD BLOOMINGTON IL 61705
Full post office address including city and zip code

Home Address: 2707 CROOKED CREEK RD BLOOMINGTON IL 61705
Full address including city and zip code

Position(s): COUNTY TREASURER MCLEAN COUNTY
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

FILED
McLEAN COUNTY, ILLINOIS
DEC 01 2017
KATHY MICHAEL
COUNTY CLERK

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

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Business Entity	Instrument of Ownership	Position of Management
N/A		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

Complete and sign on reverse ➤➤➤

FILED
McLEAN COUNTY, ILLINOIS

DEC 01 2017

Kathy Michael
COUNTY CLERK

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Leif Green 11-27-2017

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Janet S. Hood Filing for Calendar Year: 2017-18

Mailing Address: 1307 Stephens Dr., Normal, IL 61761
Full post office address including city and zip code

Home Address: 1307 Stephens Dr., Normal, IL 61761
Full address including city and zip code

Position(s): Republican Precinct Committeeman McLean County
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS
NOV 29 2017
Kathy Michael
COUNTY CLERK

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

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Business Entity	Instrument of Ownership	Position of Management
none	—	—

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
none	—	—

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

FILED
McLEAN COUNTY, ILLINOIS
NOV 29 2017
Kathy Michael
COUNTY CLERK

none

Complete and sign on reverse ➤➤➤

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

none

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

none

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

none

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

none

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

none

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

FILED
McLEAN COUNTY, ILLINOIS
NOV 29 2017
Kathy Michael
COUNTY CLERK

Janet S. Hood
(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Jeremiah Houston Filing for Calendar Year: 2017 - 2018

Mailing Address: 101 Wilson Dr. Carlock 61725
Full post office address including city and zip code

Home Address: 101 Wilson Dr. Carlock 61725
Full address including city and zip code

Position(s): mclean County Board — Mclean County
Each office or position of employment for which this statement is filed — Unit of Government

Additional Position(s): mayor of Carlock — Village of Carlock
Each office or position of employment for which this statement is filed — Unit of Government

FILED
McLEAN COUNTY, ILLINOIS
NOV 27 2017
Kathy Michael
COUNTY CLERK

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

RECEIVED
McLEAN COUNTY
NOV 27 2017
McLEAN COUNTY CLERK

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Jeremiah Houston 11-24-17
(Signature of Person Making the Statement) (Date)

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: CHRISTOPHER HOWICK Filing for Calendar Year: 2018

Mailing Address: 5 CHRISTINE WAY, BLOOMINGTON IL 61701
Full post office address including city and zip code

Home Address: 5 CHRISTINE WAY, BLOOMINGTON IL 61701
Full address including city and zip code

Position(s): COUNTY BOARD, MCLEAN COUNTY DISTRICT 3
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS
DEC 01 2017
COUNTY CLERK

Please check one of the following: ☑ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/A		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

Complete and sign on reverse ▶▶▶

4. List the identity (including the addre[illegible]r legal description of real estate) of any c[illegible]al asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Nov 26th 201[illegible]

(Signature of Person Making the Statement) **(Date)**

FILED
McLEAN COUNTY, ILLINOIS
DEC 01 2017
Kathy Michael
COUNTY CLERK

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Mark W. Johnson Filing for Calendar Year: 2017/2018

Mailing Address:
Full post office address including city and zip code

Home Address:
Full address including city and zip code

Position(s): County Board Dist 4 McLean County
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

Please check one of the following: ☐ Candidate OR ☐ Annual Filing OR ☐ Supplemental

FILED
McLEAN COUNTY, ILLINOIS
DEC 04 2017
COUNTY CLERK

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
	None	

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
	None	

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

None

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

None

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

None

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

None

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

None

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

None

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Mark W. [illegible] 12/3/2017

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Elizabeth Johnston Filing for Calendar Year:

Mailing Address: 3321 Topaz Road Normal IL 61761
Full post office address including city and zip code

Home Address: 3321 Topaz Road Normal IL 61761
Full address including city and zip code

Position(s): County Board Member McLean County Board
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s): N/A
Each office or position of employment for which this statement is filed Unit of Government

FILED
MCLEAN COUNTY, ILLINOIS
DEC 04 2017
Kathy Michael
COUNTY CLERK

Please check one of the following: ☑ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/A		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Elizabeth Johnson 12/1/17

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

FILED
McLEAN COUNTY, ILLINOIS
NOV 2 2 2017
Kathy Michael
COUNTY CLERK

Name: Mark Eugene Jontry Filing for Calendar Year:. 2017-2018

Mailing Address: 2160 Granby Lane Normal 61761
Full post office address including city and zip code

Home Address: 2160 Granby Lane Normal 61761
Full address including city and zip code

Phone: 309-888-5120 E-mail address: jontrym@roe17.org

Position(s): Regional Superintendent of Schools - DeWitt, Livingston - Logan - McLean Counties
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

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Business Entity	Instrument of Ownership	Position of Management
N/A		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Mac E. Etty 11/22/17

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Kevin G. Lower Filing for Calendar Year: 2018

Mailing Address: 1504 S. Low St Bloomington IL 61701
Full post office address including city and zip code

Home Address: Bloomington, IL 1504 S. Low St 61701
Full address including city and zip code

Phone: 309 830 7498 E-mail address: skyliner007@Hotmail.com

Position(s): Precinct Committeeman Republican Party Bloomington #18
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

NOV 27 2017

Please check one of the following: [X] Candidate OR [ ] Annual Filing OR [ ] Supplemental

Kathy Michael
COUNTY CLERK

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
None		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
None		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

None

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

None

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

None

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

None

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

None

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

None

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

11-27-2017

(Signature of Person Making the Statement) (Date)

FILED
McLEAN COUNTY, ILLINOIS

NOV 27 2017

Kathy Michael
COUNTY CLERK

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: RANDALL MARTIN Filing for Calendar Year:

Mailing Address: 753 E 2000 NORTH ROAD, DANVERS, IL 61732
Full post office address including city and zip code

Home Address: 753 E 2000 NORTH ROAD, DANVERS, IL 61732
Full address including city and zip code

Position(s): COUNTY BOARD MEMBER McLEAN COUNTY
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

NOV 28 2017

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

Kathy Michael
COUNTY CLERK

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
NA		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
NA		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

NA

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

NA

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

NA

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

NA

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

NA

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

NA

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Randall Martin 11-13-2017

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Kathy Michael Filing for Calendar Year: 2018

Mailing Address: 1805 Pier Way #306 Bloomington, IL 61704
Full post office address including city and zip code

Home Address: 1805 Pier Way #306 Bloomington, IL 61704
Full address including city and zip code

Phone: 309.838.3210 E-mail address: kathymichael16@gmail.com

Position(s): McLean County Clerk County Clerk
Each office or position of employment for which this statement is filed Unit of Government McLean Co.

FILED
McLEAN COUNTY, ILLINOIS

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

NOV 30 2017

Please check one of the following: ☑ Candidate OR ☐ Annual Filing OR ☐ Supplemental

Kathy Michael
COUNTY CLERK

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/a		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/a		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/a

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/a

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/a

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/a

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/a

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/a

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Kathy Michael 11/27/17

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Bennett Morris Filing for Calendar Year: 2018

Mailing Address: 1230 Eastport Dr, Bloomington, IL 61704
Full post office address including city and zip code

Home Address: 1230 Eastport Dr, Bloomington, IL 61704
Full address including city and zip code

Position(s): County Board – District 7 County
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

DEC 01 2017

Please check one of the following: ☑ Candidate OR ☐ Annual Filing OR ☐ Supplemental

Kathy Michael
COUNTY CLERK

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/A	N/A	N/A

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A	N/A	N/A

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

11/26/17

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS
Kathy Michael, McLean County Clerk
115 East Washington Street, Room 102, Bloomington, IL 61701

Name: David Matthew Parker Filing for Calendar Year: 2017

Mailing Address: P.O. Box 944 Bloomington, IL 61702
Full post office address including city and zip code

Home Address: 2106 Fox Creek Road Bloomington, IL 61701
Full address including city and zip code

Position(s): N/A N/A
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s): N/A N/A
Each office or position of employment for which this statement is filed Unit of Government

FILED McLEAN COUNTY, ILLINOIS NOV 28 2017 Kathy Michael COUNTY CLERK

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/A	N/A	N/A

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A	N/A	N/A

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

Complete and sign on reverse ➤➤➤

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

David Matthew Park 11-28-17

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Nikita Richards Filing for Calendar Year: 2017

Mailing Address: 202 Packard Street Bloomington, Ill 61701
Full post office address including city and zip code

Home Address: 202 Packard Street Bloomington, Ill 61701
Full address including city and zip code

Phone: (309) 660 2275 E-mail address: nikitarichardsmcclerk.com

Position(s): Candidate For McLean County Clerk - County
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS

Additional Position(s): N/A
Each office or position of employment for which this statement is filed Unit of Government

NOV 27 2017

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

Kathy Michael
COUNTY CLERK

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. If **additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/A	N/A	N/A

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

Current City of Bloomington Employee

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Nikita Richards 11/25/17

(Signature of Person Making the Statement) (Date)

State of Illinois
County of McLean
This instrument was acknowledged before me on
11/25/17 (date) by Nikita D Richards (name/s of person/s)

(Signature of Notary Public)

(Seal)

OFFICIAL SEAL
JENNIFER LAPORTE
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES 01-26-2019

FILED
McLEAN COUNTY, ILLINOIS
NOV 27 2017
Kathy Michael
COUNTY CLERK

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: JON SANDAGE Filing for Calendar Year: 2018

Mailing Address: 26 KENSINGTON CIRCLE, BLOOMINGTON IL. 61704
Full post office address including city and zip code

Home Address: 26 KENSINGTON CIRCLE, BLOOMINGTON IL. 61704
Full address including city and zip code

Position(s): SHERIFF COUNTY OF MCLEAN
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

NOV 27 2017

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

Kathy Michael
COUNTY CLERK

GENERAL DIRECTIONS

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Business Entity	Instrument of Ownership	Position of Management

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

_____

_____

Complete and sign on reverse ➤➤➤

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

VERIFICATION

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11/25/17

(Signature of Person Making the Statement) **(Date)**

FILED
McLEAN COUNTY, ILLINOIS

NOV 27 2017

Kathy Michael
COUNTY CLERK

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Ryan Scritchlow Filing for Calendar Year: 2017

Mailing Address: 107 Parkview Dr. Bloomington, IL 61701
Full post office address including city and zip code

Home Address: 107 Parkview Dr.
Full address including city and zip code

FILED
McLEAN COUNTY, ILLINOIS
NOV 27 2017
Kathy Michael
COUNTY CLERK

Position(s): County Board District 7 Mclean County
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

Please check one of the following: [x] Candidate OR [x] Annual Filing OR [ ] Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

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Business Entity	Instrument of Ownership	Position of Management
Scritchlow Enterprises	Owner	Owner

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

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McLEAN COUNTY
NOV 27 2017
McLEAN COUNTY CLERK

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

1910 S Morris Bloomington, IL - Rezoning - City of Bloomington

107 Parkview Dr Bloomington IL - Easement Vacation - City of Bloomington

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

Scritchlow Enterprises - Owner - City of Bloomington -Grading and Hydroseeding

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

RECEIVED
McLEAN COUNTY
NOV 27 2017
McLEAN COUNTY CLERK

11-27-17

(Signature of Person Making the Statement) (Date)

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Paul R. Segobiano Filing for Calendar Year: 2018

Mailing Address: 1501 W. Graham St., Bloomington, Il. 61701
Full post office address including city and zip code

Home Address: 1501 W. Graham St. Bloomington, Il. 61701
Full address including city and zip code

Position(s): McLean County Board, Dist. 8 McLean County
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

NOV 27 2017

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

Kathy Michael
COUNTY CLERK

GENERAL DIRECTIONS

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Business Entity	Instrument of Ownership	Position of Management
None		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
None		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

RECEIVED
McLEAN COUNTY
NOV 27 2017
McLEAN COUNTY CLERK

None

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

None

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

None

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

None

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

None

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

None

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

RECEIVED
McLEAN COUNTY
NOV 27 2017
McLEAN COUNTY CLERK

Paul R. Segerstrom

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: David Selzer Filing for Calendar Year:

Mailing Address: 1218 Windsor Dr Normal IL 61761
Full post office address including city and zip code

Home Address: Same
Full address including city and zip code

Position(s): McLean County Board Candidate #5 McLean County
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

NOV 27 2017

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

Kathy Michael
COUNTY CLERK

GENERAL DIRECTIONS

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1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

Complete and sign on reverse ▶▶▶

FILED
McLEAN COUNTY, ILLINOIS

NOV 27 2017

Kathy Michael
COUNTY CLERK

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

/

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

/

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

/

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

/

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

/

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Daniel J. Sullivan 11/25/17

(Signature of Person Making the Statement) **(Date)**

FILED
McLEAN COUNTY, ILLINOIS

NOV 27 2017

Kathy Michael
COUNTY CLERK

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: David Siebert Filing for Calendar Year: 2017

Mailing Address: 38282 East 1300 North Road, Saybrook, IL 61770
Full post office address including city and zip code

Home Address: 38282 East 1300 North Road, Saybrook, IL. 61770
Full address including city and zip code DCS

Position(s): ~~N/A~~ County Board Member — Unit of Government: McLean County Board
Each office or position of employment for which this statement is filed

Additional Position(s): N/A — Unit of Government:
Each office or position of employment for which this statement is filed

FILED
McLEAN COUNTY, ILLINOIS
NOV 27 2017
Kathy Michael
COUNTY CLERK

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/A		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

Complete and sign on reverse ▶▶▶

4. List the identity (including the ac ss or legal description of real estate) of any capital ass from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

None

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

FILED
McLEAN COUNTY, ILLINOIS

NOV 27 2017

Kathy Michael
COUNTY CLERK

9/9/17

(Signature of Person Making the Statement) **(Date)**

FILED
McLEAN COUNTY, ILLINOIS
NOV 27 2017
Kathy Michael
COUNTY CLERK

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Logan Smith Filing for Calendar Year: 2017

Mailing Address: 1409 N Maple St. Normal IL 61761
Full post office address including city and zip code

Home Address: 1409 N Maple St Normal IL 61761
Full address including city and zip code

Position(s): County Board McLean County
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

NOV 27 2017

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

Kathy Michael
COUNTY CLERK

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

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Business Entity	Instrument of Ownership	Position of Management

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice

RECEIVED
McLEAN COUNTY
NOV 27 2017
McLEAN COUNTY CLERK

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

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McLEAN COUNTY
NOV 27 2017
McLEAN COUNTY CLERK

Logan [signature] 11/27/17
(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: J W SNYDER Filing for Calendar Year:

Mailing Address: 104 Merganser Ct DOWNS IL 61736
Full post office address including city and zip code

Home Address: 104 Merganser Ct DOWNS IL 61736
Full address including city and zip code

Position(s): County Board Member
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

FILED
McLEAN COUNTY, ILLINOIS
DEC 04 2017
COUNTY CLERK

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/a		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/a		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/a

Complete and sign on reverse ➤➤➤

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/a

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/a

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/a

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/a

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/a

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: James Soeldner Filing for Calendar Year: 2018

Mailing Address: P.O. Box 58 Ellsworth IL 61737
Full post office address including city and zip code

Home Address: 201 S. Main St. Ellsworth IL 61737
Full address including city and zip code

Position(s): McLean County Board District 2 McLean Co Board
Each office or position of employment for which this statement is filed Unit of Government

Additional Position(s): Precinct Committeeman McLean Co.
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS
NOV 27 2017
Kathy Michael
COUNTY CLERK

Please check one of the following: ☑ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
NONE		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
NONE		

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McLEAN COUNTY
NOV 27 2017
McLEAN COUNTY CLERK

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

NONE

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

None

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

None

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

None

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

None

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

None

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

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McLEAN COUNTY
NOV 27 2017
McLEAN COUNTY CLERK

Jo Goldner 11/4/17
(Signature of Person Making the Statement) (Date)

FILED
McLEAN COUNTY, ILLINOIS
DEC 01 2017
Kathy Michael
COUNTY CLERK

STATEMENT OF ECONOMIC INTERESTS
Kathy Michael, McLean County Clerk
115 East Washington Street, Room 102, Bloomington, IL 61701

Name: STEVEN SUESS Filing for Calendar Year 2018

Mailing Address: 613 W. JACKSON ST. BLOOMINGTON, IL 61701
Full post office address including city and zip code

Home Address: 613 W. JACKSON ST. BLOOMINGTON, IL 61701
Full address including city and zip code

Position(s): COUNTY BOARD, MCLEAN COUNTY DISTRICT 8
Each office or position of employment for which this statement is filed — Unit of Government

Additional Position(s): PRECINCT COMMITTEEMAN, BLOOMINGTON-12
Each office or position of employment for which this statement is filed — Unit of Government

Please check one of the following: ☑ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

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Business Entity	Instrument of Ownership	Position of Management
N/A		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A		

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

DIRECTOR OF RADIO @ ILLINOIS STATE UNIVERSITY

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

ILLINOIS STATE UNIVERSITY

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

11/27/17

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Gerald Thompson Filing for Calendar Year:

Mailing Address: 31784 E 1400 North Rd
Full post office address including city and zip code

Home Address: same
Full address including city and zip code

Position(s): County Board County
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS
DEC 01 2017
Kathy Michael
COUNTY CLERK

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

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Business Entity	Instrument of Ownership	Position of Management
none		

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
none		

FILED
McLEAN COUNTY, ILLINOIS
DEC 01 2017
Kathy Michael
COUNTY CLERK

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

none

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

none

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

none

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

none

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

none

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

none

VERIFICATION

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FILED
McLEAN COUNTY, ILLINOIS
DEC 01 2017
Kathy Michael
COUNTY CLERK

Sarah Thompson 12-1-17
(Signature of Person Making the Statement) (Date)

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Shayna Watchinski Filing for Calendar Year: 2017

Mailing Address: 1112 W. Oakland Avenue Bloomington, Illinois 61701
Full post office address including city and zip code

Home Address: 1112 W. Oakland Avenue Bloomington, Illinois, 61701
Full address including city and zip code

Phone: 309-242-1531 E-mail address: shaynawatch@gmail.com

Position(s): McLean County Board District 8
Each office or position of employment for which this statement is filed Unit of Government

FILED
McLEAN COUNTY, ILLINOIS
DEC 04 2017
Kathy Michael
COUNTY CLERK

Additional Position(s):
Each office or position of employment for which this statement is filed Unit of Government

Please check one of the following: [X] Candidate OR [ ] Annual Filing OR [ ] Supplemental

GENERAL DIRECTIONS

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Business Entity	Instrument of Ownership	Position of Management
N/A	N/A	N/A

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A	N/A	N/A

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

12/4/17

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: Kevin Woodard Filing for Calendar Year: 2018

Mailing Address: 15 Fetzer Ct. # 3 Bloomington, IL 61704
Full post office address including city and zip code

Home Address: 15 Fetzer Ct. # 3 Bloomington, IL 61704
Full address including city and zip code

Position(s): County Board — McLean County
Each office or position of employment for which this statement is filed — Unit of Government

Additional Position(s): N/A — N/A
Each office or position of employment for which this statement is filed — Unit of Government

FILED
McLEAN COUNTY, ILLINOIS
DEC 01 2017
Kathy Michael
COUNTY CLERK

Please check one of the following: ☑ Candidate OR ☐ Annual Filing OR ☐ Supplemental

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
N/A	N/A	N/A

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
N/A	N/A	N/A

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

N/A

Complete and sign on reverse ▶▶▶

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

N/A

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

N/A

6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

N/A

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

N/A

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

N/A

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Karen Wardell 11/26/13

(Signature of Person Making the Statement) **(Date)**

STATEMENT OF ECONOMIC INTERESTS

Kathy Michael, McLean County Clerk

115 East Washington Street, Room 102, Bloomington, IL 61701

Name: LAURIE WOLLRAB Filing for Calendar Year: 2018

Mailing Address: 116 Eastview Dr., Normal, IL 61761
Full post office address including city and zip code

Home Address: 116 Eastview Dr., Normal, IL 61761
Full address including city and zip code

Position(s): County Board — McLean County
Each office or position of employment for which this statement is filed — Unit of Government

FILED
McLEAN COUNTY, ILLINOIS

Additional Position(s): —
Each office or position of employment for which this statement is filed — Unit of Government

NOV 27 2017

Please check one of the following: ☒ Candidate OR ☐ Annual Filing OR ☐ Supplemental

Kathy Michael
COUNTY CLERK

GENERAL DIRECTIONS

The interest (if constructively controlled by the person making the statement) of a spouse or any other party, shall be considered to be the same as the interest of the person making the statement. Campaign receipts shall not be included in this statement. **If additional space is needed, please attach supplemental listing.**

1. List the name and instrument of ownership in any entity doing business with a unit of local government in relation to which the person is required to file, in which the ownership interest held by the person at the date of filing is in excess of $5,000 fair market value or from which dividends in excess of $1,200 were received during the preceding calendar year. (In the case of real estate, location thereof shall be listed by the street address, or if none, then by legal description.) No time or demand deposit in a financial institution, nor any debt instrument shall be listed.

Business Entity	Instrument of Ownership	Position of Management
—	—	—

2. List the name, address and type of practice of any professional organization in which the person making the statement was an officer, director, associate, partner or proprietor or served in any advisory capacity, from which income in excess of $1,200 was derived during the preceding calendar year.

Name	Address	Type of Practice
—	—	—

3. List the nature of professional services rendered (other than to the unit or units of local government in relation to which the person is required to file) to each entity from which income exceeding $5,000 was received for professional services rendered during the preceding calendar year by the person making the statement.

—

Complete and sign on reverse ▶▶▶

FILED
McLEAN COUNTY, ILLINOIS
NOV 27 2017
Kathy Michael
COUNTY CLERK

4. List the identity (including the address or legal description of real estate) of any capital asset from which a capital gain of $5,000 or more was realized during the preceding calendar year.

—

5. List the name of any entity and the nature of the governmental action requested by any entity which has applied to a unit of local government in relation to which the person must file for any license, franchise or permit for annexation, zoning or rezoning of real estate during the preceding calendar year if the ownership interest of the person filing is in excess of $5,000 fair market value at the time of filing or if income or dividends in excess of $1,200 were received by the person filing from the entity during the preceding calendar year.

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6. List the name of any entity doing business with a unit of local government in relation to which the person is required to file from which income in excess of $1,200 was derived during the preceding calendar year other than for professional services and the title or description of any position held in that entity. No time or demand deposit in a financial institution nor any debt instrument need be listed.

—

7. List the name of any unit of government which employed the person making the statement during the preceding calendar year other than the unit or units of government in relation to which the person is required to file.

City of Bloomington, Illinois, Retired + ceased employment in April 2017.

8. List the name of any entity from which a gift or gifts, or honorarium or honoraria, valued singly or in the aggregate in excess of $500, was received during the preceding calendar year.

—

VERIFICATION

"I declare that this Statement of Economic Interests (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete statement of my economic interests as required by the Illinois Governmental Ethics Act. I understand that the penalty for willfully filing a false or incomplete statement shall be a fine not to exceed $1,000 or imprisonment in a penal institution other than the penitentiary not to exceed one year, or both fine and imprisonment."

Laurie Wollert 11/8/17

(Signature of Person Making the Statement) **(Date)**

FILED
McLEAN COUNTY, ILLINOIS

NOV 27 2017

Kathy Michael
COUNTY CLERK