City of Milwaukee
ETHICS BOARD

# Statement of Economic Interests

*For Office Use Only*

**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: Ashanti Hamilton  Do you live in the City of Milwaukee? ⦿ Yes ○ No

City Position: Alderman
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | Milwaukee, WI | Government | S |
| WFHC-Wheaton | Glendale, WI | Healthcare | F |
| | | | |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| | | |
| | | |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| | | | | | | |
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(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

**List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.**

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| 5545 N. 36th | Milwaukee | single family | |
| 3805 N. 19th | Milwaukee | single family | |

## Part 5 - Creditors — As of December 31, 2013

**List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.**

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| Wells Fargo | Milwaukee, WI | | X |
| OCWEN | Milwaukee, WI | | X |
| | | | |
| | | | |

## Part 6 - Associations — As of December 31, 2013

**List every organization with which you are associated and the nature of your association.**

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| | | |
| | | |

## Part 7 - Gifts — During calendar year 2013

**List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.**

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

***Did you file any separate gift reporting forms in 2013?*** ☐ *Yes* ☐ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

**List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.**

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

***Did you file any separate honoraria/payment of expense disclosures in 2013?*** ☐ *Yes* ☐ *No*

**I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.**

**Signature** Ashanti Hamilton **Date** 2/17/2014

**Daytime telephone number** [redacted] **Is this your home telephone number?** ☐ Yes ☐ No

**E-mail address** [redacted] **Is this your home e-mail address?** ☐ Yes ☐ No

Redacted phone number and/or email address per 19.36(11), WI Stats.

Submit Form

City of Milwaukee

ETHICS BOARD

# Statement of Economic Interests

| For Office Use Only |
|---|
| |

**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: JOE DAVIS, SR.

Do you live in the City of Milwaukee? ☒ Yes ○ No

City Position: COMMON COUNCIL / CITY CLERK - ALDERMAN
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | Milwaukee, WI | Public Service | |
| | | | |
| | | | |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| PACA | Milwaukee, WI | Community Service |
| | | |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| N/A | | | | | | |
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(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

**List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.**

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| 4900 N. 65th St. | Milwaukee | Rental | Family Owned |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

**List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.**

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| Citi Mortgage | Sioux Falls, SD | | ✓ |
| NMSB | Milwaukee, WI | | ✓ |
| Lending Club | San Francisco, CA | ✓ | |
| | | | |

## Part 6 - Associations — As of December 31, 2013

**List every organization with which you are associated and the nature of your association.**

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| Steamfitters Local 601 | Milwy WI | Member |
| | | |

## Part 7 - Gifts — During calendar year 2013

**List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.**

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

***Did you file any separate gift reporting forms in 2013?*** ☐ *Yes* ☐ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

**List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.**

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

***Did you file any separate honoraria/payment of expense disclosures in 2013?*** ☑ *Yes* ☐ *No*

**I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.**

**Signature** _____ **Date** 3/4/2014

**Daytime telephone number** [redacted] **Is this your home telephone number?** ☐ Yes ☐ No

**E-mail address** [redacted] **Is this your home e-mail address?** ☐ Yes ☐ No

Redacted phone number and/or email address per 19.36(11), WI Stats.

Submit Form

City of Milwaukee

# Statement of Economic Interests

ETHICS BOARD

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**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: NIK KOVAC  Do you live in the City of Milwaukee? ☒ Yes ○ No

City Position: ALDERMAN 3rd District
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | Milwaukee, WI | government | S |
| | | | |
| | | | |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| | | |
| | | |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| | | | |
| | | | |
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## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| | | | | | | |
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(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

**List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.**

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

**List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.**

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| | | | |
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## Part 6 - Associations — As of December 31, 2013

**List every organization with which you are associated and the nature of your association.**

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| see attached | | |
| | | |

## Part 7 - Gifts — During calendar year 2013

**List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.**

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

*Did you file any separate gift reporting forms in 2013?* ☐ *Yes* ☐ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

**List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.**

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

*Did you file any separate honoraria/payment of expense disclosures in 2013?* ☐ *Yes* ☐ *No*

**I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.**

**Signature** _____ **Date** 2-27-14

**Daytime telephone number** 414 286 3765 **Is this your home telephone number?** ☐ Yes ☒ No

**E-mail address** nkovac@milwaukee.gov **Is this your home e-mail address?** ☐ Yes ☒ No

Submit Form

NIK KOVAC

# Part 6 - Associations

Riverwest Neighborhood Assc.
Urban Ecology Center
Lake Park Friends
Juneau Park Friends
Milwaukee Art Museum
Milwaukee Public Museum
Bicycle Federation of Wisconsin
Milwaukee Arts Board
Milwaukee Library Board
Golda Meir Library
Milwaukee River Greenway Coalition
Milwaukee County Federated Library System

member

Green Bay Packers Football Club — stockholder

City of Milwaukee

ETHICS BOARD

# Statement of Economic Interests

For Office Use Only

CITY OF MILWAUKEE
14 FEB 27 AM 11:36
CITY CLERK'S OFFICE

**E-MAIL, MAIL OR FAX TO:**

City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: Robert J. Bauman

Do you live in the City of Milwaukee? ☒ Yes ☐ No

City Position: Alderman
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | | | |
| | | | |
| | | | |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| | | |
| | | |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| Nicholas Family of Funds | | | | X | X | |
| Wells Fargo Funds | | | | X | X | |
| Deferred Comp Fund | | | | X | | X |
| | | | | | | |
| | | | | | | |

(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

**List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.**

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| N/A | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

**List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.**

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |
| | | | |

## Part 6 - Associations — As of December 31, 2013

**List every organization with which you are associated and the nature of your association.**

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| Historic Concordia Neighbors | | NEIGHBORHOOD GROUP |
| | | |

## Part 7 - Gifts — During calendar year 2013

**List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.**

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

***Did you file any separate gift reporting forms in 2013?*** ☐ *Yes* ☐ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

**List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.**

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

***Did you file any separate honoraria/payment of expense disclosures in 2013?*** ☐ *Yes* ☐ *No*

**I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.**

**Signature** _____ **Date** 2/27/14

**Daytime telephone number** 414 286-3774 **Is this your home telephone number?** ☐ Yes ☐ No

**E-mail address** _____ **Is this your home e-mail address?** ☐ Yes ☐ No

Submit Form

City of Milwaukee
ETHICS BOARD

# Statement of Economic Interests

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**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: James Bohl  Do you live in the City of Milwaukee? ☒ Yes ○ No

City Position: Alderman, 5th District
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | Milw, WI | City Gov't | S |
| Loving Light Healing LLC | Milw, WI | Reiki + Holistic Health | F |
| | | | |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| N/A | | |
| | | |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| City of Milwaukee Deferred Comp. | | | | ✓ | | ✓ |
| State of Wisc. Eivest | | | ✓ | ✓ | ✓ | |
| American Funds Roth IRA (Jim) | | | | ✓ | ✓ | |
| American Funds Roth IRA (Colleen) | | | | ✓ | ✓ | |
| | | | | | | |

(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| N/A | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| | | | |
| | | | |
| Nissan Motor Acceptance Corp | Dallas, TX | ✓ | |
| Ocwen Mortgage | Waterloo, IA | | ✓ |

## Part 6 - Associations — As of December 31, 2013

List every organization with which you are associated and the nature of your association.

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| Teen Challenge of Wisc. | Milw, WI | Board Advisor |
| | | |

## Part 7 - Gifts — During calendar year 2013

List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

*Did you file any separate gift reporting forms in 2013?* ☐ *Yes* ☐ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

*Did you file any separate honoraria/payment of expense disclosures in 2013?* ☐ *Yes* ☒ *No*

I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.

Signature James A Bohl Date 2-26-14

Daytime telephone number 414-286-3870 Is this your home telephone number? ☐ Yes ☒ No

E-mail address jbohl@milwaukee.gov Is this your home e-mail address? ☐ Yes ☒ No

Submit Form

City of Milwaukee

ETHICS BOARD

# Statement of Economic Interests

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ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: Milele Coggs

Do you live in the City of Milwaukee? ☒ Yes ○ No

City Position: 6th District Alderwoman
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | Milwaukee, WI | Government | S |
| Milwaukee Metro Sewerage District | Milwaukee, WI | Sewerage Treatment | S |
| SkyWest Airlines | Milwaukee, WI | Airlines | F |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| | | |
| | | |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| | | | | | | |
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(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

**List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.**

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

**List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.**

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| Sallie Mae | Wilkes-Barre, PA | | ✓ |
| Great Lakes | Madison, WI | ✓ | |
| Wells Fargo Dealer Services | Milwaukee, WI | ✓ | |
| | | | |

## Part 6 - Associations — As of December 31, 2013

**List every organization with which you are associated and the nature of your association.**

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| WI Black Historical Museum | Milwaukee, WI | Board member |
| League of Young Voters | Milwaukee, WI | Board member |

## Part 7 - Gifts — During calendar year 2013

**List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.**

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

***Did you file any separate gift reporting forms in 2013?*** ☐ *Yes* ☐ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

**List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.**

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| Cogop/Young Academy | | $200 | Honoraria for Graduation Speech |
| | | | |
| | | | |

***Did you file any separate honoraria/payment of expense disclosures in 2013?*** ☐ *Yes* ☐ *No*

**I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.**

**Signature** Mikel A. Cosgr-Phillips **Date** 2/27/14

**Daytime telephone number** [redacted] **Is this your home telephone number?** ☐ Yes ☒ No

**E-mail address** [redacted] **Is this your home e-mail address?** ☒ Yes ☐ No

Submit Form

Redacted phone number and/or email address per 19.36(11), WI Stats.

CITY OF MILWAUKEE

14 JAN 22 PM 4:10

For Office Use Only

CITY CLERK'S OFFICE

City of Milwaukee

# Statement of Economic Interests

ETHICS BOARD

**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: Willie C. Wade

Do you live in the City of Milwaukee? ☑ Yes ○ No

City Position: Alderman 7th District
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income

**For calendar year 2013**

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | Milwaukee, WI | Gov | S |
| St. Joseph Hospital | Milwaukee, WI | Health care | F |
| | | | |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| Milw. Metro Sewer Dist | Milwaukee | Board member |
| | | |
| | | |

## Part 2 - Business

**As of December 31, 2013**

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| Paymat LLC | Real Estate | Real Estate | Milw. WI. |
| | | | |
| | | | |

## Part 3 - Investments

**As of December 31, 2013**

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| ING | | | | ✓ | ✓ | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| 3763 nth 53rd st | milwaukee | House | Owner |
| 4365 nth 41st | Milwaukee | House | Owner |

## Part 5 - Creditors — As of December 31, 2013

List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| Educators Credit Union | Milw. WI | | ✓ |
| Bank of America | San Diego, CA | | ✓ |
| | | | |
| | | | |

## Part 6 - Associations — As of December 31, 2013

List every organization with which you are associated and the nature of your association.

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| | | |
| | | |

## Part 7 - Gifts — During calendar year 2013

List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

*Did you file any separate gift reporting forms in 2013?* ☐ *Yes* ☑ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

*Did you file any separate honoraria/payment of expense disclosures in 2013?* ☐ *Yes* ☐ *No*

I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.

Signature Willie C. Wade Date 1-22-14

Daytime telephone number 414-286-3764 Is this your home telephone number? ☐ Yes ☑ No

E-mail address wwade@milwaukee.gov Is this your home e-mail address? ☐ Yes ☑ No

Submit Form

cont. Part 4

| | | | |
|---|---|---|---|
| 4334 w. Lisbon ave | milwaukee | House | owner |
| 3562 nth 12th st. | milwaukee | House | owner |

City of Milwaukee
ETHICS BOARD

# Statement of Economic Interests

For Office Use Only

CITY OF MILWAUKEE
14 MAR -5 AM 12:41
CITY CLERK'S OFFICE

**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: ROBERT G. DONOVAN Do you live in the City of Milwaukee? ☒ Yes ○ No

City Position: ALDERMAN
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| CITY OF MILW. | MILW. WI | EMPLOYEE | SELF |
| | | | |
| | | | |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| | | |
| N/A | | |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| | | | |
| N/A | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| Dalbard Corp | | | | X | X | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| N/A | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| First Bank Financial | Oconomowoc Wis | | Mortgage $164,000 |
| | | | |
| | | | |

## Part 6 - Associations — As of December 31, 2013

List every organization with which you are associated and the nature of your association.

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| Stonegate Club | Milw Wis | member |
| Guild Society | Milw Wis | member |

## Part 7 - Gifts — During calendar year 2013

List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

*Did you file any separate gift reporting forms in 2013?* ☐ *Yes* ☐ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| | N/A | | |
| | | | |
| | | | |

*Did you file any separate honoraria/payment of expense disclosures in 2013?* ☐ *Yes* ☐ *No*

I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.

Signature Robert G. Vanvoorn Date 3/4/14

Daytime telephone number 286-3778 Is this your home telephone number? ☐ Yes ☐ No

E-mail address _____ Is this your home e-mail address? ☐ Yes ☐ No

Submit Form

City of Milwaukee
ETHICS BOARD

# Statement of Economic Interests

For Office Use Only

CITY OF MILWAUKEE
14 JAN 22 AM 11:33
CITY CLERK'S OFFICE

**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: ROBERT W. PUENTE  Do you live in the City of Milwaukee? ● Yes ○ No

City Position: ALDERMAN
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| CITY OF MILWAUKEE | MILWAUKEE, WI. | ALDERMAN | S |
| DIRECT SUPPLY | MILWAUKEE, WI. | HEALTH CARE | F |
| GOODWILL | WAUKESHA, WI | RETAIL | F |
| CITY OF MILWAUKEE | MILWAUKEE, WI | HEALTH CARE | F |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| CITY OF MILWAUKEE | MILWAUKEE, WI. | RETIRED - LAW ENFORCEMENT |
| | | |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
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(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

## Part 6 - Associations — As of December 31, 2013

List every organization with which you are associated and the nature of your association.

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| FBI NA | MILWAUKEE, WI. | MEMBER |
| | | |

## Part 7 - Gifts — During calendar year 2013

List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

*Did you file any separate gift reporting forms in 2013?* ☐ *Yes* ■ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

*Did you file any separate honoraria/payment of expense disclosures in 2013?* ☐ *Yes* ■ *No*

I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.

Signature Robert W. Puente Date 01/21/2014

Daytime telephone number 414-286-2868 Is this your home telephone number? ☐ Yes ☒ No

E-mail address RPUENT@MILWAUKEE.GOV Is this your home e-mail address? ☐ Yes ☒ No

Submit Form

City of Milwaukee
ETHICS BOARD

# Statement of Economic Interests

For Office Use Only

CITY OF MILWAUKEE
2014 FEB 28 AM 10: 02
CITY CLERK'S OFFICE

**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: MICHAEL J. MURPHY  Do you live in the City of Milwaukee? ● Yes ○ No

City Position: ALDERMAN
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | Milwaukee, WI | Elected Official | Self |
| Hellermann-Tyton | Milwaukee, WI | Manufacturing | Family |
| | | | |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| | | |
| | | |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| Hellermann-Tyton Corp | ✓ | | | | | ✓ |
| Fidelity National Services | ✓ | | | | ✓ | |
| Southwest Airlines | ✓ | | | | ✓ | |
| Time Warner | ✓ | | | | ✓ | |
| Looms Bond | ✓ | | | | ✓ | |
| Fidelity Select Biotechnology | ✓ | | | | ✓ | |

(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

**List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.**

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

**List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.**

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| Chase Mortgage | Columbus, OH | | ✓ |
| | | | |
| | | | |
| | | | |

## Part 6 - Associations — As of December 31, 2013

**List every organization with which you are associated and the nature of your association.**

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| | | |
| | | |

## Part 7 - Gifts — During calendar year 2013

**List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.**

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

***Did you file any separate gift reporting forms in 2013?*** ☐ ***Yes*** ☐ ***No***

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

**List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.**

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

***Did you file any separate honoraria/payment of expense disclosures in 2013?*** ☐ ***Yes*** ☐ ***No***

**I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.**

**Signature** Michael J. Murphy **Date** 2/28/14

**Daytime telephone number** (414) 286-3763 **Is this your home telephone number?** ☐ Yes ☑ No

**E-mail address** mmurph@milwaukee.gov **Is this your home e-mail address?** ☐ Yes ☑ No

**Submit Form**

City of Milwaukee
ETHICS BOARD

# Statement of Economic Interests

For Office Use Only
CITY OF MILWAUKEE
2014 FEB 26 AM 11:53
CITY CLERK'S OFFICE

**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: JOSEPH A. DUDZIK  Do you live in the City of Milwaukee? ● Yes ○ No

City Position: ALDERMAN, 11TH DISTRICT
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| CITY OF MILW. | MILWAUKEE / WI | PUBLIC SERVANT | S |
| ROCKWELL INC | " " | INDUSTRIAL | F |
| K.F.C. | WEST ALLIS / WI | LABORER | F |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| ~~IRIS~~ | — | — |
| SOCIAL SECURITY | MILWAUKEE / WI | INSURANCE / GOV. |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| IRIS | STATE OF WISCONSIN | SERVICES | MILWAUKEE / WI |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| N/A | | | | | | |
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(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| N/A | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| HERITAGE C.U. | MILWAUKEE/WI | ✓ | |
| P.N.C. | " " | ✓ | |
| PRIME C.U. | " " | ✓ | |
| | | | |

## Part 6 - Associations — As of December 31, 2013

List every organization with which you are associated and the nature of your association.

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| N/A | | |
| | | |

## Part 7 - Gifts — During calendar year 2013

List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

*Did you file any separate gift reporting forms in 2013?* ☐ *Yes* ☐ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| N/A | | | |
| | | | |
| | | | |

*Did you file any separate honoraria/payment of expense disclosures in 2013?* ☐ *Yes* ☐ *No*

I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.

Signature _____ Date 2/24/12

Daytime telephone number 286-3768 Is this your home telephone number? ☐ Yes ☐ No

E-mail address _____ Is this your home e-mail address? ☐ Yes ☐ No

Submit Form

City of Milwaukee

ETHICS BOARD

# Statement of Economic Interests

*For Office Use Only*

**E-MAIL, MAIL OR FAX TO:**

City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: Jose G. Perez  Do you live in the City of Milwaukee? ⦿ Yes ○ No

City Position: Alderman, 12th District
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | Milwaukee, WI | Government | S |
| | | | |
| | | | |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| | | |
| | | |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| City of Milwaukee Deferred Compensation Plan | | | | X | X | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

**List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.**

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

**List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.**

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| US Bank | St. Louis, MO | | x |
| US Bank | St. Louis, MO | x | |
| Great Lakes Higher Education | Madison, WI | x | |
| Discover | Salt Lake City, UT | x | |

## Part 6 - Associations — As of December 31, 2013

**List every organization with which you are associated and the nature of your association.**

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| (see attached) | | |
| | | |

## Part 7 - Gifts — During calendar year 2013

**List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.**

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| Mueller Communications | Milwaukee, WI | NAACP Freedom Dinner tickets | $200 |
| Journey House | Milwaukee, WI | Fashion Show tickets | $180 |
| Milwaukee Bucks | Milwaukee, WI | Game tickets' upgrade | $135 |

***Did you file any separate gift reporting forms in 2013?*** ☐ *Yes* ■ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

**List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.**

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| NALEO (see Part 6) | $600 | | Annual Convention |
| HELO (see Part 6)) | $500 | | Board of Directors Retreat |
| | | | |

***Did you file any separate honoraria/payment of expense disclosures in 2013?*** ☐ *Yes* ■ *No*

**I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.**

**Signature** _____ **Date** 02/28/14

**Daytime telephone number** 286-3762 **Is this your home telephone number?** ■ Yes ■ No

**E-mail address** jperez@milwaukee.gov **Is this your home e-mail address?** ■ Yes ■ No

Submit Form

Jose G. Perez – Alderman, 12th District

Statement of Economic Interests

Part 6 - Associations

| | | | |
|---|---|---|---|
| 1. | Milwaukee Area Technical College | Milwaukee, WI | Board Member |
| 2. | Survive Alive Foundation | Milwaukee, WI | Board Member |
| 3. | Walker's Square Neighborhood Association | Milwaukee, WI | Member |
| 4. | Hispanic Elected Local Officials (HELO) | Washington D.C. | Board Member |
| 5. | National Association of Latino Elected and Appointed Officials (NALEO) | Washington D.C. | Member |

City of Milwaukee
ETHICS BOARD

# Statement of Economic Interests

*For Office Use Only*

**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: Terry L. Witkowski  Do you live in the City of Milwaukee? ⦿ Yes ○ No

City Position: Common Council/City Clerk, Alderman
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | Milwaukee, WI | Government | S |
| | | | |
| Alverno College | Milwaukee, WI | Education | F |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| ERS City of Milwaukee | Milwaukee, WI | Government |
| | | |
| Social Security (F) | USA | Government |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| UW-Whitewater | Blue Sky Consulting | Safety Service | Milwaukee, WI |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| Persching, LLC | | | | X | X | |
| Prudential Mutual Fund Service | | | | X | | X |
| Met Life Securities | | | | X | | X |
| Nationwide Retirement Solutions | | | | X | | X |
| | | | | | | |

(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

**List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.**

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

**List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.**

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

## Part 6 - Associations — As of December 31, 2013

**List every organization with which you are associated and the nature of your association.**

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| South Side Business Club and Polish Heritage Alliance | Milwaukee, WI and Franklin, WI | Member |
| Milwaukee Society, Polish National Alliance | Franklin, WI | Board |

## Part 7 - Gifts — During calendar year 2013

**List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.**

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

***Did you file any separate gift reporting forms in 2013?*** ☐ *Yes* ☒ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

**List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.**

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

***Did you file any separate honoraria/payment of expense disclosures in 2013?*** ☐ *Yes* ☒ *No*

**I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.**

**Signature** Terry L Witkowski **Date** February 26,2014

**Daytime telephone number** [redacted] **Is this your home telephone number?** ☐ Yes ☒ No

**E-mail address** [redacted] **Is this your home e-mail address?** ☐ Yes ☒ No

Redacted phone number and/or email address per 19.36(11), WI Stats.

**Submit Form**

City of Milwaukee
ETHICS BOARD

# Statement of Economic Interests

For Office Use Only
CITY OF MILWAUKEE
14 FEB 2? AM 2: 1
CITY CLERK'S OFFICE

**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: T. Anthony Zielinski Do you live in the City of Milwaukee? ✓ Yes ○ No

City Position: Alderman, 14th District
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | Milwaukee, WI | Alderman | S |
| | | | |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| Law Office of T. Anthony Zielinski | Milwaukee WI | Law |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| | | | | | | |
| | | | | | | |
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| | | | | | | |

(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

**List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.**

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| N/A | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

**List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.**

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| ACS Student Loan | | | ✓ |
| Chase Home Loan | | | ✓ |
| Fifth Third Bank | | ✓ | |
| Chase Card Services | | ✓ | |

## Part 6 - Associations — As of December 31, 2013

**List every organization with which you are associated and the nature of your association.**

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| | | |
| | | |

## Part 7 - Gifts — During calendar year 2013

**List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.**

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

***Did you file any separate gift reporting forms in 2013?*** ☐ *Yes* ☐ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

**List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.**

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

***Did you file any separate honoraria/payment of expense disclosures in 2013?*** ☐ *Yes* ☐ *No*

**I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.**

**Signature** [signature] **Date** Feb 28, 2014

**Daytime telephone number** [redacted] **Is this your home telephone number?** ☐ Yes ☒ No

**E-mail address** [redacted] **Is this your home e-mail address?** ☐ Yes ☒ No

**Submit Form**

Redacted phone number and/or email address per 19.36(11), WI Stats.

City of Milwaukee
ETHICS BOARD

# Statement of Economic Interests

*For Office Use Only*

CITY OF MILWAUKEE
14 MAR 10 AM 6:52
CITY CLERK'S OFFICE

**E-MAIL, MAIL OR FAX TO:**
City of Milwaukee Ethics Board, 200 E. Wells Street, Room 205, Milwaukee, WI 53202
ethics@milwaukee.gov • Fax: (414) 286-3456

**Due February 28, 2014**

**Filed in 2014 for Calendar Year 2013 – Print legibly in black ink or type**

Name: Willie L. Hines, Jr. Do you live in the City of Milwaukee? ⦿ Yes ○ No

City Position: Alderman
(include department, title, board, commission, elective office if applicable)

**SEE THE INSTRUCTION SHEET FOR EXPLANATIONS, EXAMPLES AND EXCEPTIONS.**

## Part 1 - Sources of Income — For calendar year 2013

**A. List each EMPLOYER from which you and your immediate family received $1,000 or more during 2013 (e.g., City of Milw.).**

| Name of Payer | City and State | Nature of Business | Self (S) or Family (F) |
|---|---|---|---|
| City of Milwaukee | Milwaukee, WI | Municipality | S |
| Greater Milwaukee Foundation | Milwaukee, WI | Community Foundation | F |
| | | | |

**B. List other sources of income from which you or your immediate family received income of $1,000 or more in 2013.**

| Name of Payer | City and State | Nature of Business |
|---|---|---|
| | | |
| | | |
| | | |

## Part 2 - Business — As of December 31, 2013

**For any payer listed above that is a partnership, limited liability company, Subchapter S or Subchapter C corporation in which you or your immediate family has a 10% or greater interest, list the IDENTITY OF EACH PAYER of $1,000 to such partnership, LLC, Sub-S or Sub-C corporation (see instructions for certain payers which do not have to be listed).**

| Name of Payer | Name of Business Receiving Payment | Nature of Business | City and State |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

## Part 3 - Investments — As of December 31, 2013

**List stocks, bonds, notes or other investments you and your immediate family held ($5,000 or more).**

| Name of each Security or Mutual Fund Sponsor | TYPE OF SECURITY - "✓" ONE | | | | AMOUNT - "✓" ONE | |
|---|---|---|---|---|---|---|
| | Stock, Options, Futures | Bond, Note | WI Gov't. Sect. | Mutual Funds or Money Market | $5,000-$50,000 | more than $50,000 |
| Procter and Gamble | X | | | | X | |
| Morgan Stanley | | | | X | | X |
| | | | | | | |
| | | | | | | |
| | | | | | | |

(Rev. 1/14)

## Part 4 - Real Estate — As of December 31, 2013

**List specific location of REAL ESTATE in Milwaukee, Ozaukee, Racine, Washington and Waukesha counties (except your principal residence) in which you or your immediate family hold at least 10% interest which is valued at $5,000 or more.**

| Street Address | County | Type of Property | Nature of Interest |
|---|---|---|---|
| | | | |
| | | | |

## Part 5 - Creditors — As of December 31, 2013

**List each CREDITOR to whom you and your immediate family owed $5,000 or more on December 31, 2013.**

| Creditor ($5,000 or more) | City and State | $5,000 - $50,000 (check ✓) | more than $50,000 (check ✓) |
|---|---|---|---|
| Citibank | Sioux Falls, SD | X | |
| Nationstar | Dallas, TX | X | |
| Bank of America | Simi Valley, CA | X | |
| | | | |

## Part 6 - Associations — As of December 31, 2013

**List every organization with which you are associated and the nature of your association.**

| Name of Organization | City and State | Nature of Association (e.g., member, officer, director) |
|---|---|---|
| WI Center District | Milwaukee, WI | Board Member |
| Visit Milwaukee | Milwaukee, WI | Board Member |

## Part 7 - Gifts — During calendar year 2013

**List individuals and organizations that provided you with ENTERTAINMENT or GIFTS more than $50 in 2013.**

| Name of Provider | City and State | Description of Gift | Approx. Value |
|---|---|---|---|
| Chris Abele | Milwaukee, WI | Bucks Tickeet | $834.60 |
| | | | |
| | | | |

***Did you file any separate gift reporting forms in 2013?*** ☐ *Yes* ☒ *No*

## Part 8 - Honoraria and Payment of Expenses — During calendar year 2013

**List sources of HONORARIA and payment of EXPENSES of more than $50 related to your city duties, for 2013.**

| Payer | Approximate Value of Expenses | Amount of Honorarium | Circumstances of Receipt |
|---|---|---|---|
| Philadelphia Baptists Church | 0 | $200 | Church Men's Conference |
| | | | |
| | | | |

***Did you file any separate honoraria/payment of expense disclosures in 2013?*** ☐ *Yes* ☒ *No*

**I have read the accompanying instructions and certify that the information contained in this Statement of Economic Interests is true, complete and correct to the best of my knowledge, information and belief. If any part has been left blank, I have done so intentionally because there is nothing to report. Typing your name on the line below constitutes your signature of this document. Please sign and date your form and list your daytime telephone number and e-mail address. Clearly indicate if your daytime telephone number or e-mail address is your home telephone number or home e-mail address. In the event of a public records request, all information required by law will be released.**

**Signature** Willie L. Hines, Jr. **Date** March 10, 2014

**Daytime telephone number** [redacted] **Is this your home telephone number?** ☐ Yes ☐ No

**E-mail address** [redacted] **Is this your home e-mail address?** ☐ Yes ☐ No

Redacted phone number and/or email address per 19.36(11), WI Stats.

**Submit Form**