Cook County Office, Board or Commission Affidavit



Please fill out this application completely. Incomplete affidavits will not be considered for appointment. Please also submit your resume.

Please email the completed affidavit to Johnathan Buckner, Legislative Coordinator, at Jonathan Buckner Jonathan.Buckner2@cookcountyil.gov and Brian Miller, Office of Commissioner Larry Suffredin at bmiller@suffredin.org.

APPLICANT INFORMATION											
Which office/board/commission are you applying for?			of Ethics								
Last Name	Matthews	F		Von		M.I.	T.	Т.			
Current Street Address						Apartment/ Unit #					
City	Hazel Crest		Stat	e IL			ZIP	60429	0429		
Phone		E-mail Address		A COLUMN TO THE PARTY OF THE PA							
How long have you lived at your current address				ess?		27 years					
Do you have multiple residences in Cook County?					YES 🗍 I	vo 🛭					

Under penalties of perjury, I state that, to the best of my knowledge, the information contained in this application is true, correct and complete.
Applicant's Name: Von Matthews
Applicant's Signature: // Mathew
Date: March 21, 2017
Subscribed and sworn before me this 21 day of March , 2017
Notary Signature: Palance LAURA POLANCO Official Seal Notary Public - State of Illinois My Commission Expires Dec 20, 2020
Notary Stamp

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