



19-3644

**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

**APPLICANT INFORMATION**

Which office/board/commission  
are you applying for? CENSUS COMMISSION

Last Name LOGAN First PHYLLIS M.I. MARIE

Current Street Address 216 N AUSTIN BLVD Apartment/  
Unit #

City OAK PARK State IL ZIP 60302

Phone (708)612-8518 E-mail  
Address

How long have you lived at your current address? 9 years

Do you have multiple residences in Cook County? YES NO x

If yes, please list your other  
addresses and which address  
is your primary address:

**APPOINTMENT INFORMATION**

Have you received a Homeowner's Property Tax Exemption at any other address other than your primary address during the current tax year?	YES	NO <input checked="" type="checkbox"/>
Is your primary residence located within the district of the office, board, or commission that you are applying for?	YES <input checked="" type="checkbox"/>	NO
Have you reviewed the legal requirements for the appointment that you are seeking?	YES <input checked="" type="checkbox"/>	NO
Do you fulfill the legal requirements for the appointment that you are seeking?	YES <input checked="" type="checkbox"/>	NO
Do you possess any conflicts of interest that would prevent you from adequately representing the interests of the office, board or commission that you are applying for?	YES	NO <input checked="" type="checkbox"/>
Will you notify the President of the Cook County Board of Commissioners and the Chairman of the Legislation and Intergovernmental Relations Committee of the Cook County Board of Commissioners if there is a change to any of the statements set forth in this instrument?	YES <input checked="" type="checkbox"/>	NO

### **APPOINTMENT OBLIGATIONS**

I have received and reviewed a copy of Article 70 of the State Officials and Employees Ethics Act (5 ILCS 430/70, et al.) and am aware of my obligations under Article 70 of the State Officials and Employees Ethics Act.	YES <input checked="" type="checkbox"/>	NO
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I have received and reviewed a copy of the Cook County Ethics Ordinance and am aware of my obligations under the County's Ethics Ordinance (Chapter 2, Article VII, Divisions 1-3 of the Cook County Code of Ordinances).	YES <input checked="" type="checkbox"/>	NO
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If appointed, I agree to cooperate with the Cook County Board of Ethics and/or Office of the Cook County Independent Inspector General in my capacity as an appointee as may be required under Article 70 of the State Officials and Employees Ethics Act 5 ILCS 430/70-20) or the Cook County Ethics Ordinance (Chapter 2, Article VII, Divisions 1-3 of the Cook County Code of Ordinances).	YES <input checked="" type="checkbox"/>	NO
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If appointed, I shall not take any action that discriminates against any individual because of their race, color, sex, age, religion, disability, national origin, ancestry, sexual orientation, marital status, parental status, military discharge status, source of income, housing, or any other protected category established by law, statute or ordinance.

YES

NO

Under penalties of perjury, I state that, to the best of my knowledge, the information contained in this application is true, correct and complete.

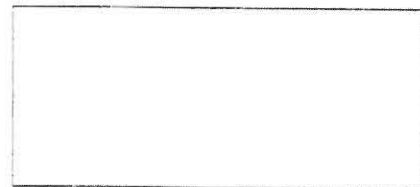
Applicant's Name: \_\_\_\_\_ PHYLLIS M LOGAN \_\_\_\_\_

Applicant's Signature:  \_\_\_\_\_

Date: \_\_\_\_\_ MAY 10, 2019 \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Notary Signature: \_\_\_\_\_



Notary Stamp