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 appointments@cookcountyil.gov

APPLICANT INFORMATION

Which office/board/commission are you applying for?	Asset Management				
Last Name	Yonan	First	John	M.I.	H
Current Street Address	5 Buckthorn Road			Apartment/ Unit #	
City	South Barrington	State	Illinois	ZIP	60010
Phone	847/381-0545	E-mail Address	John.Yonan@cookcountyil.gov		
How long have you lived at your current address?	9 Years				
Do you have multiple residences in Cook County?	YES ☐	NO ☒			
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 ☒
Is your primary residence located within the district of the office, board, or commission that you are applying for?	YES ☒	NO ☐
Have you reviewed the legal requirements for the appointment that you are seeking?	YES ☒	NO ☐
Do you fulfill the legal requirements for the appointment that you are seeking?	YES ☒	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 ☒
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 ☒	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 ☒	NO ☐
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 ☒	NO ☐
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 ☒	NO ☐

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 X 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: John Yonan

Applicant's Signature: John Yonan

Date: 1/28/2021

Subscribed and sworn before me this 28TH day of JANUARY, 2021

Notary Signature: Eric W Wong

ERIC W WONG
Official Seal
Notary Public - State of Illinois
My Commission Expires Aug 27, 2023

Notary Stamp