

## VENDOR DISCLOSURE STATEMENT

Vendor Name:	VENDONE	VI2CTO20KF	STATEME
Address:	Menoni & Mocogni, Inc. 2160 Skokie Highway, Highland Park, IL. 60035		
Contact Person:			
	Daniel J Miotti	Contact Phone #	
Bid/RFP/SOI/Contract/Renewal:	Bid #20158		847-432-0850

Vendors wishing to contract with Lake County for goods and services in an amount greater than \$30,000 shall submit this form in advance of award. This disclosure statement is not required for utility companies regulated by the Illinois Commerce Commission or

- A familial relationship between a Lake County elected official, department director, deputy director and manager and owners, principals, executives, officers, account managers or other similar managerial positions of the vendor's company. Familial relationship is defined as a spouse (including civil partner), child, stepchild, parent, stepparent, grandparent, inlaws (including parent, grandparent, sibling, or child), relatives and non-relatives living in the same residence, and offspring
- All political campaign contributions made by the vendor or an owner, principal, executive, officer, account manager, or other similar managerial position of the vendor to any county board member, county board chair, or countywide elected

If there is nothing to report in a section, please state none in the appropriate space.

## FAMILIAL RELATIONSHIPS

List names and departments/agencies of Lake County employees or public officials with whom owners, principals, or officers of the vendor's company have a familial relationship and the nature of the relationship. Attach additional pages as necessary. (Provide all names or state none in the space below. Do not leave blank.)

Name and Department/Agency of Lake County  Employee/Public Official	Familial Dalasta L.		
N/A !	Familial Relationship		
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CAMBAICAI CONTRIBUTION			

## CAMPAIGN CONTRIBUTIONS

List campaign contributions that have been made within the last five years that exceed \$150 annually. Attach additional pages as necessary. (Provide all names or state none in the space below. Do not leave blank.)

Recipient	Donor	ne space below. Do not leave bla Description (e.g., cash, type of item, in-kind service, etc.)	Amount/Value	Date Made
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Continuing disclosure is	required if infor	mation changes. This Vendo	or Disclosure Statemen	The second

Continuing disclosure is required if information changes. This Vendor Disclosure Statement form is available at

The full text of the County's Ethics and Procurement policies and ordinances are available at www.lakecountyil.gov.

I hereby acknowledge that the information above is accurate and complete, that I am an authorized signer on behalf of the vendor, that I have read and understand these disclosure requirements, and that I agree to update this information if there are any related

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Title:	President	
Date:	November 2, 2020	
	Date:	

Vendors must insert "x" in the following box indicating exception and provide a brief narrative for exception.