



**Ethics Officer's
Revolving Door Statement**
RD-102 (Please print or type)

Please provide the information requested in Section III below based on office or agency records and/or Ethics Officer's knowledge, not the employee's RD-101. Pursuant to Ill. Admin. Code Title 2, §1620.610(c)(6) (2012), this statement must be submitted to the LIG within 5 calendar days of receiving notification (the RD-101 form) from the employee or former employee.

I. Member or State Employee's Information

Full name of Member or State employee or former Member or State employee (hereafter, Member or employee) to whom employment or compensation offer has been made:

Member or employee's State start date:

Member or employee's end date or anticipated end date:

Member or employee's job/working title(s) during last year of employment:

Describe the Member or employee's job duties during last year of employment (please attach job description if available):

II. Ethics Officer's Information

Ethics Officer's name:

Ethics Officer's agency title:

Mailing street address:

City: State: Zip code:

Phone number: Fax:

E-mail address:

Date you received notification (the completed RD-101 form) from the Member or employee:

III. Prospective Employer's Information

Please provide the information requested below regarding the Member or employee's prospective employer. If the Member or employee intends to be self-employed, please complete a separate RD-102 form for each prospective client that the Member or employee has identified in his/her RD-101 form(s).

Name of prospective employer or, if Member or employee will be self-employed, name of prospective client:

Names of any parent or subsidiaries of prospective employer or prospective client of which the Ethics Officer is aware:

1) List and describe any contracts, grants, purchase orders, invoices or change orders the prospective employer or prospective client, its parent, or subsidiary was awarded by the Member or employee's office or agency during the year prior to the Member or employee's termination of State employment, including amounts and dates. Use a separate sheet if necessary.

2) Please describe the involvement, if any, of the Member or employee with State contracts or change orders during the year prior to the Member or employee's termination of State employment. Use a separate sheet if necessary.

3) If the Member or employee was an officer or employed in the executive branch within the year prior to termination of State employment, please so indicate and provide any information of which you are aware regarding the executive branch office or position, including department or agency.

4) Please indicate whether the Member or employee's position or former position has been identified under Section 5 ILCS 430/5-45(c) of the State Officials and Employees Ethics Act as a position that may have the authority to participate personally and substantially in the award of state contracts, grants, or change orders or in licensing and regulatory decisions.

Yes No

5) Please state whether you, as Ethics Officer, have any information not previously disclosed that may be relevant to the LIG's determination of whether the Member or employee should be barred from accepting the employment or compensation offer:

Yes No

6) If you answered "Yes" to Question 5, please explain and include, if applicable, a description of any conflicts or other issues related to the employment or compensation offer that are of concern to you. Use a separate sheet if necessary.

Signature

Name (Please print or type)

Date:

IV. Instructions for Submission

Please submit a completed copy of this form to the LIG, preferably along with a copy of the Member or employee's RD-101. You may send completed forms to the LIG at the following:

Legislative Inspector General Michael P. McCuskey
420 Stratton Office Building
Springfield, IL 62706
(217) 558-1560 (phone)
MichaelM@ilga.gov (email)