



Ethics Officer's Revolving Door Statement (RD-102)

(Please print or type)

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

I. State Employee or Former State Employee's Information

Full name of state employee or former state employee* to whom employment or compensation offer has been made:

*"state employee" includes employees and former employees of the Regional Transportation Authority, the Chicago Transit Authority, Metra, and Pace.

State employee's or former state employee's start date with your agency:

State employee's or former state employee's end date or anticipated end date with your agency:

State employee's or former employee's job/working title with your agency:

Describe the state employee's or former state employee's job duties with your agency (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 state employee or former state employee:

III. Prospective Employer's Information

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

Name of prospective employer or, if state employee or former state 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) Please list and describe any contracts, grants, purchase orders, invoices or change orders the prospective employer or prospective client, its parent, or its subsidiary held or was awarded by the employee's agency during the year prior to the state employee's termination of state employment, including amounts and dates. Use a separate sheet if necessary.

2) Please list any regulatory or licensing decisions the employee's agency has made that applied to the prospective employer or prospective client, its parent, or its subsidiary during the year prior to the state employee's termination of state employment. Use a separate sheet if necessary.

3) Please describe, if any, the state employee's or former state employee's involvement with, or administration of, contracts, grants, or change orders, or regulatory or licensing processes at your agency during the year prior to the state employee's termination of state employment. Use a separate sheet if necessary.

4) Please indicate whether the state employee's or former state employee's 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 or fiscal administration 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 OEIG's determination of whether the state employee or former state 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

You may send your completed form to the OEIG at oig.revolvingdoor@illinois.gov.