

NOTICE TO PERSON COMPLETING FORM

The Secretary of State is the filing agent for these reports and is not authorized to provide legal interpretations regarding any aspect of the State Employment Records Act, including the definitions below. All questions regarding applicable reporting requirements should be referred to the legal counsel for your agency or the Illinois Attorney General's office.

(5 ILCS 410)

Please note that all State agencies shall make the reports by this Act using the forms developed under this subsection. The reports must be certified and signed by an official of the agency who is responsible for the information provided. Agencies shall file, as public information and by January 1 of each year, a copy of all reports required by the State Employment Records Act with the Secretary of State Index Department.

Agency Workforce Report

Fiscal Year 2021

Agency: _____

Sent To: Secretary of State, Index Department
111 E. Monroe St., Springfield, IL 62756

INCOME	Total Number of Agency Employees	Females	Minorities	Black or African American Males	Black or African American Females	Hispanic or Latino Males	Hispanic or Latino Females	Asian Males	Asian Females	American Indian or Alaska Native Males	American Indian or Alaska Native Females	Native Hawaiian or other Pacific Islander Males	Native Hawaiian or other Pacific Islander Females	Caucasian Males	Caucasian Females	Males with Physical Disabilities	Females with Physical Disabilities	
		No. / %	No. / %	No. / %	No. / %	No. / %	No. / %	No. / %	No. / %	No. / %	No. / %	No. / %	No. / %	No. / %	No. / %	No. / %	No. / %	No. / %
\$ 0 - \$ 9,999																		
\$10,000 - \$19,999																		
\$20,000 - \$29,999																		
\$30,000 - \$39,999																		
\$40,000 - \$49,999																		
\$50,000 - \$59,999																		
\$60,000 - \$69,999																		
\$70,000 - \$79,999																		
\$80,000 - \$99,999																		
\$100,000+																		
TOTAL Employees																		
Professional																		
Contractual																		
Position Openings																		
Openings Filled—New Hires																		
Openings Filled—Promotions																		

CERTIFICATION

I certify that the information contained in this report is accurate.

Printed name and title of signatory

Authorized Signature of official responsible for reporting

Date

Printed name of agency

A copy of this report also must be filed with Office of the Governor.

Printed by authority of the State of Illinois. October 2021 - 220 - I 164.21