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STATEMENT OF FINANCIAL INFORMATION

This Statement is made for the reporting period: **January 1 through December 31, 2009.**

FINANCIAL DISCLOSURE

Submit Date: 29-Apr-2010

Personal Information

Name: Ott, Marc A

Address:

11213 Cusseta Lane

Austin, TX 78739

Occupation: City of Austin City Manager

Spouse Information

Name: Ott, Pamela

Address:

11213 Cusseta Lane

Austin, TX 78739

Occupation: Surgical Nurse

1. **List all sources of occupational income that exceeded 10% of your gross income or \$5,000 in salary, bonuses, commissions or professional fees, or \$20,000 in payment for goods, products or non-professional services per source.**

	Name of employer or source of income	Business address	Nature of occupation or business
1	City of Austin	301 W. 2nd Street Austin, Texas 78701	City of Austin - City Manager
2	St. David's Hospital	901 W. Ben White Blvd. Austin, Texas 78704	Surgical Nurse

2. **If you are a self-employed solo practitioner or if you had at least 5% interest in a partnership, professional corporation or other entity through which you do business, list the names and addresses of clients or customers from whom you or this partnership, professional corporation, or entity received 10% or more of gross income or \$5,000 in salary, bonuses, commissions or professional fees; or \$20,000 in payment for goods, products or non-professional services during the reporting period.**

Name of client or customer	Address
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N/A

3. List all sources of income which exceeded either \$5,000 or were in excess of 10% of your gross income received from interest, dividends, royalties, rents, trust disbursements or other non-occupational sources.

	Name of source	Nature of income
1	Property Rental	Rent

4. Identify any source (person, business entity or other organization) of a gift of any money or other thing of value exceeding \$100 or identify any source who gave you a series of gifts the total value of which exceeds \$100. You need not report campaign contributions which are reported as required by other law and you need not report gifts received from the following relatives: Spouse, Children, Children-in-law, Parents, Parents-in-Law, Grandchildren, Grandchildren-in-Law, Grandparents, Grandparents-in-Law, Brothers, Brothers-in-Law, Sisters, Sisters-in-Law, Uncles, Uncles-in-Law, Aunts, Aunts-in-Law, Nephews, Nephews-in-Law, Nieces, Nieces-in-Law, First Cousins, or First Cousins-in-Law.

Name of source of gift

N/A

5. List the names of any corporation, partnership, limited partnership, or other entity in which you held, owned, acquired, or sold stock, or any other equity ownership having a value exceeding \$5,000 or equivalent to 5% or more of the stock or equity in the entity, at any time during the reporting period.

Name of company or entity

1 IDEX

6. List and describe all bonds, notes and other commercial paper which you held, owned, acquired or sold at any time during the reporting period if the combined face value of the bonds, notes and commercial paper exceeded \$5,000.

Description of commercial paper

N/A

7. List all other income or revenue in excess of \$5,000 per source.

Name of source

N/A

8. List and describe all real property in which you hold any legal or beneficial interest including real property for which you have entered a contract for sale. The

description should be sufficient to locate the property, and include the street address, if any, and the present use of the property.

	Street address of property	Description of property	Present use of property
1	11213 Cusseta Lane Austin Texas 78739	Residence	Personal Residence
2	6317 Dawn Hills Fort Worth, Texas 76132	Residence	Rental Property

- 9. List and describe all real property held, owned, acquired or sold, or under a contract for sale by a corporation, partnership, limited partnership, professional corporation or other entity in which you own or control at least a 5% interest. The description should be sufficient to locate the property and include a street address, if any, and the present use of the property.**

Street address of property	Description of property	Present use of property
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N/A

- 10. List all loans and extensions of credit in excess of \$5,000 on which you are the lender or creditor, including the name of the debtor and the rate of interest, if any.**

Name of obligee	Rate of interest, if any
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N/A

- 11. List all loans or transactions in excess of \$5,000 on which you are a guarantor or co-signer including the names of the borrower and lender.**

Name of obligee/lender	Rate of interest, if any
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N/A

- 12. List all loans, debts, and other financial liabilities you have which are in excess of \$5,000 which are presently outstanding or which existed at any time during the reporting period.**

	Name of lender/creditor/obligee	Rate of interest, if any	Date obligation was incurred
1	Countrywide (House Mortgage)	---	---
2	Citi-Mortgage	---	---
3	US Bank (Car Lease)	---	---

4	Toyota Financial (Car Note)	---	---
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List all loans, debts, and other financial liabilities in excess of \$5,000 of any corporation, partnership, limited partnership, professional corporation or other entity in which you own or control at least a 5% interest which are presently outstanding or which existed at any time during the reporting period.

Name of lender/creditor/obligee	Rate of interest, if any	Date obligation was incurred
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N/A

13. List all boards of directors of which you are a member and the offices or executive positions which you hold in corporations, partnerships, limited partnerships, professional corporations, or other entities, including non-business entities. (Do not include positions on corporations or other entities owned by the City of Austin or created by the City Council.)

Name of organization	Position held
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N/A

Electronic Certification by Affidavit

I swear or affirm, under penalty of perjury, that the facts stated in the above Statement of Financial Information are true to the best of my knowledge or belief and the Statement fully shows all information required to be reported by me pursuant to section [2-7-72](#) of the City Code for the reporting period indicated.

This electronically submitted Statement of Financial Information is considered to be under oath by the person required to file the Statement regardless of the absence of or defect on the affidavit of verification, including the signature.

I, **Ott, Marc A**, hereby swear of affirm that I have completed the Statement of Financial Information on **April 29, 2010**.

STATEMENT OF FINANCIAL INFORMATION
Chapter 2-7-72, Austin Code of 2003
Form Prescribed by City of Austin City Clerk's Office
P.O. Box 1088
Austin, Texas 78767

INSTRUCTIONS

This statement is for persons who are city officials to provide financial information for the period January 1 through December 31 of the preceding year. This Form is required to be completed by the Following City Officials:

Aides to the Mayor and Council members
Assistant City Managers
City Attorney
City Auditor
City Clerk
City Manager
Commissioners of the Conventions and
Visitors Commission
Comptroller
Department Heads

Deputy City Attorney
Deputy City Clerk
Deputy Department Heads (where no deputy
department head serves, the first
principal assistant)
Municipal Court Judges (including Substitute
Judges)
Purchasing Officer
Treasurer

AUSTIN CITY CLERK
RECEIVED
2011 APR 28 AM 11 52

FORM
4

2011 APR 28 AM 11 52

This statement must be received by the City Clerk by 4:45 p.m. on the last Friday in April.* The report must be signed under oath. This form may be copied to provide additional space for reporting. In reporting information required by this form, a City Official shall include the same information as it pertains to his or her spouse, by separate listing. However, a separate report for the City Official's spouse is not required.

*Except that an initial statement of financial information must be filed within thirty days after being hired or appointed.

This report is made for: January 1 through December 31, 2008.

FINANCIAL DISCLOSURE

NAME:

(Last)
Ott

(First)
Marc

(Middle)
Anthony

ADDRESS:

11213 Cusseta Lane Austin, Texas 78749

OCCUPATION:

City Manager

SPOUSE'S NAME:

(Last)
Ott

(First)
Pamela

(Middle)
Ann

ADDRESS:

11213 Cusseta Lane Austin, Texas 78749

OCCUPATION:

Surgical Nurse

1. List all sources of occupational income which exceeded 10% of your gross income or \$5,000 in salary, bonuses, commissions or professional fees; or \$20,000 in payment for goods, products or non-professional services per source.

- a) Name of Employer or Source of Income:

City of Austin

Business Address

City of Austin – 301 W. 2nd Street Austin, Texas 78701

Nature of Occupation or Business:

City of Austin – City Manager

- b) Name of Employer or Source of Income:

Seton Medical Center Austin

Business Address

1201 West 38th Street Austin, TX 78705

Nature of Occupation or Business:

Surgical Nurse

2. If you are a self-employed solo practitioner or if you had at least 5% interest in a partnership, professional corporation or other entity through which you do business, list the names and addresses of clients or customers from whom you or this partnership, professional corporation, or entity received 10% or more of gross income or \$5,000 in salary, bonuses, commissions or professional fees; or \$20,000 in payment for goods, products or non-professional services during the reporting period.

Name of Client or Customer: N/A

Address: _____

Name of Client or Customer: _____

Address: _____

3. List all sources of income which exceeded either \$5,000 or were in excess of 10% of your gross income received from interest, dividends, royalties, rents, trust disbursements or other non-occupational sources.

a. Name of Source: _____

Nature of Income _____
(Either interest, dividends, royalties, rents or trust disbursements)

b. Name of Source _____

Nature of Income _____
(Either interest, dividends, royalties, rents or trust disbursements)

4. Identify any source (person, business entity or other organization) of a gift of any money or other thing of value exceeding \$100, or identify any source who gave you a series of gifts the total value of which exceeds \$100. You need not report campaign contributions which are reported as required by other law and you need not report gifts received from the following relatives:

Spouse		Sisters	Sisters-in-Law
Children	Children-in-Law	Uncles	Uncles-in-Law
Parents	Parents-in-Law	Aunts	Aunts-in-Law
Grandchildren	Grandchildren-in-Law	Nephews	Nephews-in-Law
Grandparents	Grandparents-in-Law	Nieces	Nieces-in-Law
Brothers	Brothers-in-Law	First Cousins	First Cousins-in-Law

a. Name of Source of Gift: N/A

b. Name of Source of Gift: _____

5. List the names of any corporation, partnership, limited partnership, or other entity in which you held, owned, acquired, or sold stock, or any other equity ownership having a value exceeding \$5,000 or equivalent to 5% or more of the stock or equity in the entity, at any time during the reporting period.

a. Name of Company or Entity: IDEX Mutual Fund

b. Name of Company or Entity: _____

6. List and describe all bonds, notes and other commercial paper which you held, owned, acquired or sold, at any time during the reporting period if the combined face value of the bonds, notes and commercial paper exceeded \$5,000.

a. Description of Commercial Paper: N/A

b. Description of Commercial Paper: _____

7. List all other income or revenue in excess of \$5,000 per source.

a. Source: Sold house in Fort Worth (6317 Dawn Hills, Fort Worth, Texas 76132)

b. Source: _____

8. List and describe all real property in which you hold any legal or beneficial interest, including real property for which you have entered into a contract for sale. The description should be sufficient to locate the property, and include the street address if any, and the present use of the property.

a. Street Address of Property:
6317 Dawn Hills, Fort Worth, Texas 76132

Description of Property:
Residence

Present Use of Property:
Personal Residence

b. Street Address of Property:
11213 Cusseta Austin, Texas 78739

Description of Property:
Residence

Present Use of Property:
Personal Residence

c. Street Address of Property: _____

Description of Property: _____

Present Use of Property: _____

9. List and describe all real property held, owned, acquired or sold, or under a contract for sale, by a corporation, partnership, limited partnership, professional corporation, or other entity in which you own or control at least a 5% interest. The description should be sufficient to locate the property and include a street address, if any, and the present use of the property.

a. Street Address of Property: 6317 Dawn Hills, Fort Worth, Texas 76132

Description of Property: Residential Property

Present Use of Property: Sold

b. Street Address of Property: _____

Description of Property: _____

Present Use of Property: _____

10. List all loans and extensions of credit in excess of \$5,000 on which you are the lender or creditor, including the name of the debtor and the rate of interest, if any.

a. Name of Oblige: : Mercedes Benz Financial Services

Rate of Interest: _____

b. Name of Oblige: _____

Rate of Interest: _____

11. List all loans or transactions in excess of \$5,000 on which you are a guarantor or co-signer, including the names of the borrower and lender.

a. Name of Oblige: NA

Rate of Interest: _____

b. Name of Oblige: _____

Rate of Interest: _____

12. (1) List all loans, debts, and other financial liabilities you have which are in excess of \$5,000 which are presently outstanding or which existed at any time during the reporting period.

a. Name of Lender/Creditor/Oblige: Countrywide (House Mortgage)

Rate of Interest, if any: _____

Date Obligation was Incurred: _____

b. Name of Lender/Creditor/Oblige: Citi-Mortgage

Rate of Interest, if any: _____

Date Obligation was Incurred: _____

c. Name of Lender/Creditor/Obligee: Toyota Financial

Rate of Interest, if any: _____

Date Obligation was Incurred: _____

d. Name of Lender/Creditor/Obligee: Mercedes Benz Financial Services

Rate of Interest, if any: _____

Date Obligation was Incurred: _____

(2) List all loans, debts, and other financial liabilities in excess of \$5,000 of any corporation, partnership, limited partnership, professional corporation or other entity in which you own or control at least a 5% interest, which are presently outstanding or which existed at any time during the reporting period.

a. Name of Lender/Creditor/Obligee: N/A

Rate of Interest, if any: _____

Date Obligation was Incurred: _____

b. Name of Lender/Creditor/Obligee: _____

Rate of Interest, if any: _____

Date Obligation was Incurred: _____

13. List all boards of directors of which you are a member and the offices or executive positions which you hold in corporations, partnerships, limited partnerships, professional corporations, or other entities, including non-business entities. (Do not include positions on corporations or other entities owned by the City of Austin or created by the City Council.)

a. Name of Organization: N/A

Position Held _____

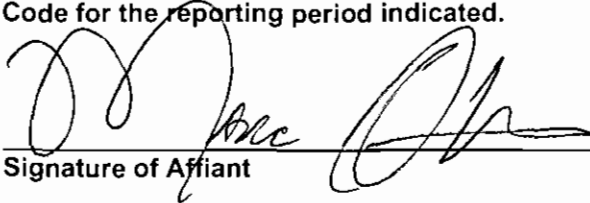
b. Name of Organization _____

Position Held _____

State of Texas
County of Travis

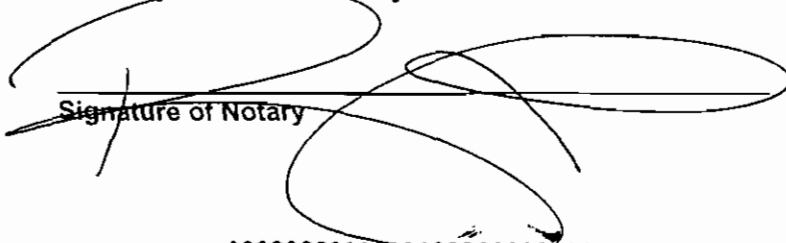
VERIFICATION

I do solemnly swear that the preceding Financial Statement, filed herewith is in all things true and correct, and fully shows all information required to be reported by me pursuant to Section 2-7-72 City Code for the reporting period indicated.



Signature of Affiant

SWORN TO AND SUBSCRIBED BEFORE ME by
this the 28 day of April, 2011,
to certify which witness my hand and seal.



Signature of Notary

