

STATEMENT OF FINANCIAL INFORMATION

This Statement is made for the reporting period: **January 1 through December 31, 2014.**

FINANCIAL DISCLOSURE

Submit Date: 24-Apr-2015

Personal Information

Name: Troxclair, Ellen

Address:

8510 Tyhurst Dr.

Austin, TX 78749

Occupation: City Council Member & Realtor

Spouse Information

[REDACTED]

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.

	Name of employer or source of income	Business address	Nature of business or occupation	Category of amount
1	State of Texas	1400 Congress Ave.	State Legislative Staff	IV
2	Keller Williams Realty	12515-8 Research Blvd	Real Estate	IV
3	State of Texas	1701 N Congress Ave	Agency Staff	VI

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

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- 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	Category of amount
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N/A

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- 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, First Cousins-in-Law.

Name of source of gift	Category of amount
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N/A

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- 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

N/A

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- 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	Category of amount
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1	Mutual Fund	I
2	Mutual Fund	I

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

Source	Category of amount
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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	8510 Tyhurst Dr.	Home	Homestead

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	Category of amount
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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	Category of amount
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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	Category of amount	Date obligation was incurred
1	Frost Bank	4.54%	VI	8/13
2	Credit Union	2%	II	2/15

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	Category of amount	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, **Troxclair, Ellen**, hereby swear of affirm that I have completed the Statement of Financial Information on **April 24, 2015**.