AUSTIN CITY CLERK POSTING: DATE/TIME

FORM

2009 MAR 9 AM 10 25

Page 1 of 11

## 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:

Mayor City Council Members Candidates

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 incumbent and non-incumbent candidates file within five working days after the deadline for filing for their respective offices. However, incumbent candidates are not required to refile if an identical financial statement for the previous year has already been filed.

Where a monetary amount or value of income of an asset is required to be reported, the exact amount need not be reported. The statement may instead include the category of amount as follows:

Category I: At least \$1 but less than \$10,000;
Category II: At least \$10,000 but less than \$20,000;
Category IV: At least \$20,000 but less than \$50,000;
Category V: At least \$50,000 but less than \$75.000;
Category V: At least \$75.000 but less than \$100,000;
Category VI: \$100,000 or more, report to nearest \$100,000.

Fill in the year for which this report is made:

January 1 through December 31, 20

FINANCIAL DISCLOSURE NAME:		
(Last)	(First)	(Middle)
MARTINEZ	Mile	William
ADDRESS: 5229	Towar Trus	; <b>t</b>
OCCUPATION:	ounce   Memb	w
SPOUSE'S NAME:	(Firet)	(Middle)
(Last) Wendler	(First)	(Middle)
	CHUK	
ADDRESS:	9 Tower Tr	. 1
ist all sources of occupational	income which exceeded 10% or professional fees; or \$20,0	State Senator  6 of your gross income or \$5,000  100 in payment for goods, products
a. Name of Employer or Source of	fincome:	
Business Address:		
Nature of Occupation or Busine	ess:	
Category of Amount:	/	
b. Name of Employer or Source of	of Income.	
Business Address:	/	
Nature of Occupation or Busine	ess:	
Category of Amount:		

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:	
Name of Client or Customer:	
Address:	<u>/</u>
Name of Client or Customer:	
Address:	
Name of Client or Eustomer:	
Address:	
non-occupational sources.  a. Name of Source:	
Nature of Income:	or trust disbursements)
Category of Amount:	
b. Name of Source:	
Nature of income:	or trust disbursements)
Category of Amount:	,
c. Name of Source:	
Nature of Income:(Either interest, dividends, royalties, rents	
	or trust disbursements)
Category of Amount:	or trust disbursements)

d. Name of Source:	
Nature of Income:	
(Either interest, dividends, royalties, rer	nts or trust disbursements)
Category of Amount:	
/-	

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-in-Law Nephews Nieces Nieces-in-Law First Cousins-in-Law First Cousins a. Name of Source of Gift:\_ Category of Amount:\_ b. Name of Source of Gift; Category of Amount:

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:	
b. Name of Company or Entity:	
_	
c. Name of Company or Entity:	

<ol><li>List and describe all bonds, notes an sold, at any time during the reportin commercial paper exceeded\$5,000.</li></ol>				
a. Description of Commercial Paper:	<del></del>			
Category of Amount:				
b. Description of Commercial Paper				
Category of Amount:				
c. Description of Commercial Paper:				
Category of Amount:				
d. Description of Commercial Paper:				
Category of Amount:				
7. List all other income or revenue in e	excess of \$5,0	00 per sourc	e.	
a. Source:				
Category of Amount:				
b. Source:	_/			
Category of Amount:				
9. List and describe all real property in	which you bo	ld any logal (	ar bonaficial into	rost including roal
8. List and describe all real property in property for which you have entered locate the property, and include the	into a contra	t for sale. Th	e description sho	ould be sufficient to
a. Street Address of Property:	5229	Tower	TRAIL, A	Justin, 78723
Description of Property:	Home			
Present Use of Property:	Reside	nck		

b. Street Address of Property:	
Description of Property:	
Present Use of Property:	
c. Street Address of Property:	
Description of Property:	
Present Use of Property:	
d. Street Address of Property:	
Description of Property.	
Present Use of Property:	
orporation, partnership, limited partnership, profession wn or control at least a 5% interest. The description sh	nal corporation, or other entity in which ould be sufficient to locate the property
orporation, partnership, limited partnership, profession wn or control at least a 5% interest. The description sh	nal corporation, or other entity in which ould be sufficient to locate the property the property.
orporation, partnership, limited partnership, profession wn or control at least a 5% interest. The description should be a street address, if any, and the present use of	nal corporation, or other entity in which ould be sufficient to locate the property the property.
orporation, partnership, limited partnership, profession wn or control at least a 5% interest. The description should be a street address, if any, and the present use of a . Street Address of Property:	nal corporation, or other entity in which ould be sufficient to locate the property the property.
orporation, partnership, limited partnership, profession wn or control at least a 5% interest. The description should be a street address, if any, and the present use of a. Street Address of Property:  Description of Property:	nal corporation, or other entity in which ould be sufficient to locate the property the property.
orporation, partnership, limited partnership, profession wn or control at least a 5% interest. The description should be a street address, if any, and the present use of a. Street Address of Property:  Description of Property:	nal corporation, or other entity in which ould be sufficient to locate the property the property.
corporation, partnership, limited partnership, profession own or control at least a 5% interest. The description should be a street address, if any, and the present use of a. Street Address of Property:  Description of Property:  Present Use of Property:	nal corporation, or other entity in which ould be sufficient to locate the property the property.
orporation, partnership, limited partnership, profession wn or control at least a 5% interest. The description shoulde a street address, if any, and the present use of a. Street Address of Property:  Description of Property:  Present Use of Property:  b. Street Address of Property:	nal corporation, or other entity in which ould be sufficient to locate the property the property.
orporation, partnership, limited partnership, profession wn or control at least a 5% interest. The description ship clude a street address, if any, and the present use of a. Street Address of Property:  Description of Property:  Present Use of Property:  Description of Property:  Description of Property:	nal corporation, or other entity in which ould be sufficient to locate the property the property.
orporation, partnership, limited partnership, profession was or control at least a 5% interest. The description should be a street address, if any, and the present use of a street Address of Property:  Description of Property:  Present Use of Property:  Description of Property:  Present Use of Property:  Present Use of Property:	nal corporation, or other entity in which ould be sufficient to locate the property the property.
Description of Property:  Present Use of Property:  b. Street Address of Property:  Description of Property:  Present Use of Property:  c. Street Address of Property:	nal corporation, or other entity in which ould be sufficient to locate the property the property.

d. 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 Obligee: Mike MARHINEZ (AMPAIGN)
riale of filterest.
Category of Amount: \$27,000
b. Name of Obligee:
Rate of Interest:
Category of Amount:
c. Name of Obligee:
Rate of Interest:
Category of Amount:
d. Name of Obligee:
Rate of Interest:
Category of Amount:
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 Obligee: Vells PAKG 0
Rate of Interest: 6 %
Category of Amount: # 100 K plus
b. Name of Obligee:
Rate of Interest:
Category of Amount:

12.

c. Name of Obligee:	
Rate of Interest:	
Category of Amount:	
d. Name of Obligee:	
Rate of Interest:	
Category of Amount:	
(1) List all loans, debts, and other financial li which are presently outstanding or which exis	abilities you have which are in excess of \$5,000 sted at any time during the reporting period.
a. Name of Lender/Creditor/Obligee:	
Rate of Interest, if any:	
Category of Amount:	
Date Obligation was Incurred:	
b. Name of Lender/Creditor/Obligee:	
Rate of Interest, if any:	
Category of Amount:	
Date Obligation was Incurred	
c. Name of Lender/Creditor/Obligee:	<u> </u>
Rate of Interest, if any:	
Category of Amount:	
Date Obligation as Incurred:	
d. Name of Lender/Creditor/Obligee:	
Rate of Interest, if any:	
Category of Amount:	<del></del>
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	ı you own or
	control at least a 5% interest, which are presently outstanding or which existed at an	y time during
	the reporting period.	,
		,

a.	Name of Lender/Creditor/Obligee:
	Rate of Interest, if any:
	Category of Amount:
	Date Obligation was Incurred:
b.	Name of Lender/Creditor/Obligee:
	Rate of Interest, if any:
	Category of Amount:
	Date Obligation was Incurred:
c.	Name of Lender/Creditor/Obligee:
	Rate of Interest, if any:
	Category of Amount:
	Date Obligation was Incurred:
d.	Name of Lender/Creditor/Obligeer
	Rate of Interest, If any:
	Category of Amount:
	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:	Austin	FIGHTERS	Fund	
Position Held:	BOARD	MULB	ur	
b. Name of Organization:				
b. Name of Organization				
Position Held:				 
a Nama of Organization:				
c. Name of Organization:				
Position Held:				
d. 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

to certify which witness my hand and seal.

Signature of Notary

(SEAL)



a \sficncl1.wp5

[Print] [Close Window]

#### STATEMENT OF FINANCIAL INFORMATION

This Statement is made for the reporting period: January 1 through June 30, 2011.

## FINANCIAL DISCLOURE

**Position Name: City Council Members** 

Submit Date: 21-Sep-2009

**Personal Information** 

Name: Martinez, Michael

**Address:** 

5229 Tower Trail Austin, TX 78723

**Occupation:** Mayor Pro Tem

## **Spouse Information**

Not Applicable

1. List all changes in 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 or Occupation Amount  Category of Amount	or Source of	<b>Business Address</b>		
---	--------------	-------------------------	--	--

N/A

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 all changes in 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

N/A

3. List all changes in sources of income that 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	<b>Nature of Income</b>	Category of Amount
N/A		
- "		

4. List all changes in 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

5. List and describe all changes in real property in which you hold any legal or beneficial interest having a market value of \$5,000 or more including real property for which you have entered a contract for sale. The description should be sufficient to locate the property. Include the street address, if any, and the present use of the property.

Street Address of	<b>Description of Property</b>	<b>Present Use of Property</b>
Property		

N/A

6. List all changes in 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/Debtor	Rate of Interest	Category of Amount

N/A

7. List all changes in 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	<b>Category of Amount</b>

N/A

8a. (a) List all changes in 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. Include the name of the lender, creditor, and obligee.

Name of	Rate of Interest,	Category of	<b>Date Obligation</b>
Lender/Creditor/Obligee	if any	Amount	was Incurred

N/A

8b. (b) List all changes in 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. Include the name of the lender, creditor, and obligee.

Name of	Rate of Interest,	Category of	<b>Date Obligation</b>
Lender/Creditor/Obligee	if any	Amount	was Incurred

N/A

9. List all changes in 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
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, <u>Martinez, Michael</u>, hereby swear of affirm that I have completed the Statement of Financial Information on <u>September 21, 2009</u>.

## CITY OF AUSTIN

### STATEMENT OF FINANCIAL INFORMATION

## FOR THE REPORTING PERIOD OF JANUARY 1 TO DECEMBER 31, 20 09

## **INSTRUCTIONS**

This form is required to be completed by the following City officials and candidates for the period January 1 through December 31 of the preceding year:

Mayor and incumbent candidate
City Council members and incumbent candidates
Non-incumbent City Council candidates

This statement must be filed with the City Clerk by **4:45 p.m.** on the last Friday in April. However, incumbent and non-incumbent candidates must file this statement within five working days after the deadline for filing for their respective offices. Incumbent candidates are not required to refile if an identical financial statement for the previous year has already been filed. The report must be signed under oath. This form may be copied to provide additional space for reporting. The same information as it pertains to the City official's spouse or domestic partner (as defined in City Code Section 2-7-71) must be included by separate listing in this statement but <u>not</u> on a separate report.

NAME: <b>M</b>	actinez	Mike	William
	(Last Name)	(First Name)	(Middle Name)
ADDRESS:	5229	Tower Trail	
OCCUPATION: _	Council	Member	
	MESTIC PARTNER'S I	NAME: Lara	
	(Last Name)	(First Name)	(Middle Name)
ADDRESS (If diff	erent than above):		
		taff - State	

2010 APR 30 PM 3 05

AUSTING: DATE/TIME POSTING:

Where a monetary amount of value of income of an asset is required to be reported, the exact amount need not be reported. Instead, the statement may include a category of amount as follows:

Category I At least \$1 but less than \$10,000
Category II At least \$10,000 but less than \$20,000
Category IV At least \$20,000 but less than \$50,000
Category V At least \$50,000 but less than \$75,000
Category V At least \$75,000 but less than \$100,000
Category VI \$100,000 or more, report to nearest \$100,000

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	Business Address	Nature of Business	Category of Amount
Source of Income		or Occupation	

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

3. List all sources of income that 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
	<del>-</del>	

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 <u>not</u> report campaign contributions which are reported as required by other law and you need <u>not</u> 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	Category of Amount
Anti-Defamation League	ADL Hispanic Leadership Mission to Israel-\$3590
9	

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	
	-

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

Source	Category of	Amount
including real property	eal property in which you ho for which you have entered a locate the property. Include ty.	contract for sale. The descri
Street Address of Property	Description of Property	Present Use of Property
5229 TOWE Tr., 787.	23 Home	Residence
by a corporation, partne	l property held, owned, acquire rship, limited partnership, prof	essional corporation or other e
by a corporation, partne in which you own or corlocate the property and in	rship, limited partnership, profestrol at least a 5% interest. The nclude a street address, if any, a	essional corporation or other election established established the sufficient description should be sufficient the present use of the proper
by a corporation, partne in which you own or cor	rship, limited partnership, profestrol at least a 5% interest. The	essional corporation or other e e description should be sufficie
by a corporation, partne in which you own or corlocate the property and in	rship, limited partnership, profestrol at least a 5% interest. The nclude a street address, if any, a	essional corporation or other election established established the sufficient description should be sufficient the present use of the proper
by a corporation, partne in which you own or corlocate the property and in	rship, limited partnership, profestrol at least a 5% interest. The nclude a street address, if any, a	essional corporation or other election established established the sufficient description should be sufficient the present use of the proper
by a corporation, partne in which you own or corlocate the property and in	rship, limited partnership, profestrol at least a 5% interest. The nclude a street address, if any, a	essional corporation or other election established established the sufficient description should be sufficient the present use of the property.
by a corporation, partne in which you own or corlocate the property and in Street Address of Property  10. List all loans and extens	rship, limited partnership, profestrol at least a 5% interest. The nclude a street address, if any, a	Present Use of Property  Ooo on which you are the lend
by a corporation, partne in which you own or corlocate the property and in Street Address of Property  10. List all loans and extens creditor including the national content of the property o	rship, limited partnership, profestrol at least a 5% interest. The include a street address, if any, a Description of Property  sions of credit in excess of \$5,0	Present Use of Property  Ooo on which you are the lend
by a corporation, partne in which you own or corlocate the property and in Street Address of Property  10. List all loans and extens creditor including the national content of the property o	rship, limited partnership, profestrol at least a 5% interest. The include a street address, if any, a Description of Property  Sions of credit in excess of \$5,0 me of the debtor and the rate of	Present Use of Property  Ooo on which you are the lend interest, if any.
by a corporation, partne in which you own or corlocate the property and in Street Address of Property  10. List all loans and extens creditor including the national content of the property o	rship, limited partnership, profestrol at least a 5% interest. The include a street address, if any, a Description of Property  Sions of credit in excess of \$5,0 me of the debtor and the rate of	Present Use of Property  Ooo on which you are the lend interest, if any.
by a corporation, partne in which you own or corlocate the property and in Street Address of Property  10. List all loans and extens	rship, limited partnership, profestrol at least a 5% interest. The include a street address, if any, a Description of Property  Sions of credit in excess of \$5,0 me of the debtor and the rate of	Present Use of Property  Ooo on which you are the lend interest, if any.

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	Category of Amount

12. (a) 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. Include the name of the lender, creditor, and obligee.

Name Lender/Creditor/Obligee	Rate of Interest, if any	Category of Amount	Date Obligation was Incurred
Wells Fargo	6%	\$100K plus	2007

(b) 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. Include the name of the lender, creditor, and obligee.

Name Lender/Creditor/Obligee	Rate of Interest, if any	Category of Amount	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.

Name of Organization	Position Held
Capital Metro	Board Member
Awain Fire fighters Fund	Board Member

## **AFFIDAVIT**

I swear or affirm, under penalty of perjury, that this Statement of Financial Information is true and correct and includes all information required to be reported by me pursuant to Section 2-7-72 of the Austin City Code for the reporting period indicated.

Signature of Affiant

SWORN TO AND SUBSCRIBED BEFORE ME by the said this the 30 day of April, 200, to certify Which, witness my hand and seal of office.

(SEAL)

CANDY HINKLE Notary Public, State of Texas My Commission Expires JULY 17, 2010

# AUSTIN CITY CLERK CITY OF AUSTROSTING: DATE/TIME

## STATEMENT OF FINANCIAL INFORMATION 4 42 JULY UPDATE

## FOR THE REPORTING PERIOD OF JANUARY 1 TO JUNE 30, 20 10

## **INSTRUCTIONS**

This form is required to be completed by the **Mayor and City Council Members** for the period January 1 through June 30 of the current year.

This statement must be filed with the City Clerk by **4:45 p.m.** on the last Friday in July. The report must be signed under oath. This form may be copied to provide additional space for reporting. The same information as it pertains to the City official's spouse or domestic partner (as defined in City Code Section 2-7-71) must be included by separate listing in this statement but <u>not</u> on a separate report.

When completing this statement, only include **changes** in your disclosed information that have occurred since the last filed Statement of Financial Information as per Section 2-7-72 of the City Code.

City Code.					
NAME:	Martinez (Last Name)	(First Name)	(Middle Name)		_
ADDRESS:	5229 Tower	Trail, Austin	TX 78723		-
OCCUPATION:	Council Mem	<u>ber</u>			
SPOUSE OR DO	MESTIC PARTNER'S NA <b>Wendler</b>	AME: Lara			
	(Last Name)	(First Name)	(Middle Name)		
ADDRESS (If dif	ferent than above):				
OCCUPATION: _	Chief of SMFF	-State Sing	for	رال 2010	AUSTIN C POSTING: 1
_	amount of value of income reported. Instead, the sta	-	-	تا نطac ص	TIN CI
follows:				PM	CITY C
Category I	At least \$1 but less the	an \$10,000		<u>_</u> E	CLERK E/TIME
Category I		,		7	돍 옷

Category I At least \$1 but less than \$10,000
Category II At least \$10,000 but less than \$20,000
Category IV At least \$20,000 but less than \$50,000
Category IV At least \$50,000 but less than \$75,000
Category V At least \$75,000 but less than \$100,000
Category VI \$100,000 or more, report to nearest \$100,000

	of Employer or of Income	Business Address	Nature of Busines or Occupation	s Category of Amount
			0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0	
_				
				-
pa <b>ch</b> pa \$5	artnership, profession langes in the name artnership, profession 5,000 in salary, bon	nal corporation or other is and addresses of nal corporation, or e uses, commissions	ner entity through whice clients or customers ntity received 10% or	the least 5% interest in a sh you do business, list all from whom you or this more of gross income of \$20,000 in payment for period.
Name o	of Client or Customer	•	Address	
of or	your gross income in other non-occupation	eceived from interes	st, dividends, royalties,	rents, trust disbursements
of or	your gross income i	eceived from interes		or were in excess of 10% rents, trust disbursements  Category of Amount
of or	your gross income in other non-occupation	eceived from interes	st, dividends, royalties,	rents, trust disbursements
of or	your gross income in other non-occupation	eceived from interes	st, dividends, royalties,	rents, trust disbursements
of or	your gross income in other non-occupation	eceived from interes	st, dividends, royalties,	rents, trust disbursements
of or	your gross income in other non-occupation	eceived from interes	st, dividends, royalties,	rents, trust disbursements

5. List and describe all <b>cha</b> rinterest having a market varietered a contract for sal Include the street address,	alue e	of \$5,000 or mor The description	e including res should be suf	al property ficient to le	for which you have
Street Address of Property	D	escription of Prop	perty	Present Use	of Property
6. List all <b>changes</b> in loans a lender or creditor including					•
Name of Obligee/Debtor		Rate of Interest		Category	of Amount
					<del>-</del>
7. List all <b>changes</b> in loans or co-signer including the				on which	you are a guaranto
Name of Obligee/Lender	1	Rate of Interest		Category o	of Amount
			_		
	+				
8. (a) List all <b>changes</b> in leacess of \$5,000 which reporting period. Include	are p	resently outstand	ding or which	existed at a	
Name Lender/Creditor/Obligee	- 1	Rate of Interest, f any	Category of	Amount	Date Obligation was Incurred
	_				
				_	

1		
1	<del>-</del>	

(b) List all **changes** in 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. Include the name of the lender, creditor, and obligee.

Name Lender/Creditor/Obligee	Rate of Interest, if any	Category of Amount	Date Obligation was Incurred

9. List all changes in 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
Capital Metro	Board Chair

## **AFFIDAVIT**

I swear or affirm, under penalty of perjury, that this July Update Statement of Financial Information is true and correct and includes all information required to be reported by me pursuant to Section 2-7-72 of the Austin City Code for the reporting period indicated.

Signature of Affiant

SWORN TO AND SUBSCRIBED before me by affiant on this 30th day of July, 20 10.

Signature of Notary

(SEAL)

Page 1 of 11

## 2011 APR 29 AM 10 59

## 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:

Mayor City Council Members Candidates

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 incumbent and non-incumbent candidates file within five working days after the deadline for filing for their respective offices. However, incumbent candidates are not required to refile if an identical financial statement for the previous year has already been filed.

Where a monetary amount or value of income of an asset is required to be reported, the exact amount need not be reported. The statement may instead include the category of amount as follows:

Category I: At least \$1 but less than \$10,000;
Category II: At least \$10,000 but less than \$20,000;
Category IV: At least \$20,000 but less than \$50,000;
Category V: At least \$75,000 but less than \$100,000;
Category VI: \$100,000 or more, report to nearest \$100,000.

Fill in the year for which this report is made:

January 1 through December 31, 20\_\_\_\_

# AUSTIN CITY CLERK RECEIVED

Page 2 of 11

59

	ANTI HAK 58	AM 10 5
FINANCIAL DISCLOSURE		

(Last)	(First)	(Middle)
Martinez	Mike	William
ADDRESS: 5229 To	wer Tail	
OCCUPATION: Council	Member	
SPOUSE'S NAME: (Last) Wendler	(First)	(Middle)
ADDRESS:	_	
5229 Tove	r Trail	
occupation: Chief of Staff	2-State Senator	
Chief & Staff List all sources of occupation salary, bonuses, commission	nal income which exceeded 10% ns or professional fees; or \$20,00	
Chief & Staff  List all sources of occupation salary, bonuses, commission non-professional services per	nal income which exceeded 10% ns or professional fees; or \$20,00	00 in payment for goods, produc
Chief & Staff  List all sources of occupation salary, bonuses, commission non-professional services per	nal income which exceeded 10% as or professional fees; or \$20,00 er source.	00 in payment for goods, produc
Chief & Staff  List all sources of occupation salary, bonuses, commission non-professional services per a. Name of Employer or Source	nal income which exceeded 10% ns or professional fees; or \$20,00 er source. e of Income:	00 in payment for goods, produc
Chief & Staff  List all sources of occupation salary, bonuses, commission non-professional services per a. Name of Employer or Source Business Address:	nal income which exceeded 10% as or professional fees; or \$20,00 er source. e of Income:	00 in payment for goods, produc
Chief & Staff  List all sources of occupation salary, bonuses, commission non-professional services per a. Name of Employer or Source Business Address:  Nature of Occupation or Business	nal income which exceeded 10% as or professional fees; or \$20,00 er source. e of Income:	00 in payment for goods, produc
Chief & Staff  List all sources of occupation salary, bonuses, commission non-professional services per a. Name of Employer or Source Business Address:  Nature of Occupation or Business of Amount:	nal income which exceeded 10% as or professional fees; or \$20,00 er source. e of Income:	00 in payment for goods, produc
Chief & Staff  List all sources of occupation salary, bonuses, commission non-professional services per a. Name of Employer or Source Business Address:  Nature of Occupation or Business of Amount:	nal income which exceeded 10% ns or professional fees; or \$20,00 er source. e of Income:	00 in payment for goods, produc
Chief of Staff  List all sources of occupation salary, bonuses, commission non-professional services per a. Name of Employer or Source Business Address:  Nature of Occupation or Business of Amount:  b. Name of Employer or Source Business Address:	nal income which exceeded 10% ns or professional fees; or \$20,00 er source. e of Income:	00 in payment for goods, produc

professional fees; or \$20,000 in payme the reporting period.	
roporang ponour	
Name of Client or Customer:	
Address:	
Name of Client or Customer:	
Address:	
Address:	
Name of Olivert on Court many	
.Address:	
ncome received from interest, div	
ncome received from interest, div	eeded either \$5,000 or were in excess of 10% of your gridends, royalties, rents, trust disbursements or o
ncome received from interest, div non-occupational sources.  a. Name of Source:  Nature of Income:	ridends, royalties, rents, trust disbursements or o
ncome received from interest, divnon-occupational sources.  a. Name of Source:	ridends, royalties, rents, trust disbursements or o
ncome received from interest, div non-occupational sources.  a. Name of Source:  Nature of Income:	rents or trust disbursements)
ncome received from interest, divident of Source:  Nature of Income: (Either interest, dividends, royalties,	rents or trust disbursements)
ncome received from interest, dividend-occupational sources.  a. Name of Source:  Nature of Income:  (Either interest, dividends, royalties, Category of Amount:  b. Name of Source:  Nature of Income:	rents or trust disbursements)
ncome received from interest, divinon-occupational sources.  a. Name of Source:  Nature of Income:  (Either interest, dividends, royalties, Category of Amount:  b. Name of Source:	rents or trust disbursements)
ncome received from interest, dividend-occupational sources.  a. Name of Source:  Nature of Income:  (Either interest, dividends, royalties, Category of Amount:  b. Name of Source:  Nature of Income:	rents or trust disbursements)
income received from interest, divinon-occupational sources.  a. Name of Source:  Nature of Income:  (Either interest, dividends, royalties, Category of Amount:  b. Name of Source:  Nature of Income:  (Either interest, dividends, royalties,	rents or trust disbursements)
income received from interest, div non-occupational sources.  a. Name of Source:  Nature of Income: (Either interest, dividends, royalties, Category of Amount:  b. Name of Source:  Nature of Income: (Either interest, dividends, royalties, Category of Amount:  Category of Amount:  Category of Amount:  Nature of Income: Nature of Income:	rents or trust disbursements)
income received from interest, divinon-occupational sources.  a. Name of Source:  Nature of Income: (Either interest, dividends, royalties, Category of Amount:  b. Name of Source:  Nature of Income: (Either interest, dividends, royalties, Category of Amount:  Category of Amount:  Category of Amount:	rents or trust disbursements)

**FORM** 

Page 6 of 11

d. 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 Obligee: Chase Manhatten
Rate of Interest: 4.875 %
Category of Amount: 41
b. Name of Obligee: Prospectly Bank Set pa 8
including the name of the debtor and the rate of interest, if any.  a. Name of Obligee: ARC MANNAHER  Rate of Interest: 4.675%  Category of Amount: 41  b. Name of Obligee: ARCHARL BANK SLL pg 8  Rate of Interest: 5%
Category of Amount:
c. Name of Obligee:
Rate of Interest:
Category of Amount:
d. Name of Obligee:
Rate of Interest:
Category of Amount:
11. List all loans or transactions in excess of \$5,000 on which you are a guarantor of co-signer including the names of the borrower and lender.
a. Name of Obligee:
Rate of Interest:
Category of Amount:
b. Name of Obligee:
Rate of Interest:
Category of Amount:

c. Name of Obligee:	
Rate of Interest:	
Category of Amount:	
d. Name of Obligee:	
Rate of Interest:	
Category of Amount:	
12. (1) List all loans, debts, and other financial liabilities which are presently outstanding or which existed at a	
a. Name of Lender/Creditor/Obligee: CNA5R	
Rate of Interest, if any: 4,475 %	<u>'</u> o
Category of Amount:	
Date Obligation was Incurred: 2010	
b. Name of Lender/Creditor/Obligee: Prosip	ezty Bank
77	
Date Obligation was Incurred	
c. Name of Lender/Creditor/Obligee:	
Rate of Interest, if any:	
Category of Amount:	
Date Obligation as Incurred:	
d. Name of Lender/Creditor/Obligee:	
Rate of Interest, if any:	
Category of Amount:	
Date Obligation was Incurred:	

Date Obligation was Incurred:\_\_\_\_\_\_

d . Name of Lender/Creditor/Obligee:

Rate of Interest, If any:

Category of Amount:\_\_\_

13. List all boards of directors of which you are a member and the offices or executive positions whic
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: $C_0$	apital Metro	
Position Held: <b>Boar</b>	apital Metro	
Position Held: Board	stin Firefighters Fund 1 Member	
c. Name of Organization:		
Position Held:		
d. 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 day of April , 20// , to certify which witness my hand and seal.

(SEAL)

a \slicncl1 wp5

