

STATEMENT OF FINANCIAL INFORMATION

FORM SFI
COVER SHEET

| 1 NAME | TITLE; FIRST; MI <p style="text-align: center;">Stephanie M</p> <hr style="border-top: 1px dotted black;"/> NICKNAME; LAST; SUFFIX <p style="text-align: center;">Bazan</p> | PAGE # <p style="text-align: center;">6</p> ACCOUNT # <p style="text-align: center;">00090751</p> | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|---|--------------------------|-------|--------------------------|---------------------|--------------------------|---------------------|-------------------------------------|-----------|--------------------------|--------------|--|--|---------|--------|--|--|----------------|--|--|--|-------------|--|--|--|
| 2 ADDRESS | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP PO Box 151654 Austin, TX 78715 <input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS) | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">OFFICE USE ONLY</th> </tr> <tr> <td colspan="2">Date Received</td> </tr> <tr> <td colspan="2" style="text-align: center;">ELECTRONICALLY FILED</td> </tr> <tr> <td colspan="2" style="text-align: center;">08/29/2022</td> </tr> <tr> <td colspan="2">Receipt #</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td>HD / PM</td> <td>Amount</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2"> </td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> <tr> <td colspan="2"> </td> </tr> </table> | OFFICE USE ONLY | | Date Received | | ELECTRONICALLY FILED | | 08/29/2022 | | Receipt # | | | | HD / PM | Amount | | | Date Processed | | | | Date Imaged | | | |
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| 3 Spouse or Domestic Partner whose financial activity you are reporting | Matthew Abbott SPOUSE 7600 Clydesdale Drive Austin, TX 78745 Educator | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td> </td> <td> </td> </tr> <tr> <td colspan="2">Date Processed</td> </tr> <tr> <td colspan="2"> </td> </tr> <tr> <td colspan="2">Date Imaged</td> </tr> <tr> <td colspan="2"> </td> </tr> </table> | | | Date Processed | | | | Date Imaged | | | | | | | | | | | | | | | | | |
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| 4 REASON FOR FILING STATEMENT | <table style="width:100%;"> <tr> <td style="width:20%;"><input type="checkbox"/></td> <td>MAYOR</td> </tr> <tr> <td><input type="checkbox"/></td> <td>CITY COUNCIL MEMBER</td> </tr> <tr> <td><input type="checkbox"/></td> <td>CITY STAFF/EMPLOYEE</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>CANDIDATE</td> </tr> <tr> <td><input type="checkbox"/></td> <td>BOARD MEMBER</td> </tr> </table> <p>This form should be filed by the following City officials -- Mayor, City Council Members, and Candidates -- for the period of January 1 through December 31, 2021.</p> <p>Filing Deadlines: Mayor & Council Members must file the statement (covering the previous calendar year) not later than April 30 of each year. Except that outgoing Mayor & Council Members who have not been re-elected must file the statement (covering the previous calendar year) not later than the 30th day after the end of their term in office. Candidates must file the statement (covering the previous calendar year) within five working days after the deadline for filing for their respective offices. Except that incumbent Candidates are not required to refile if an identical statement covering the previous calendar year has already been filed.</p> <p>For all filers: Statements must be received by the City Clerk on the day stated above. When the deadline falls on a Saturday, Sunday, or City holiday, the deadline is extended to the next day which is not a Saturday, Sunday, or City holiday.</p> <p>This statement must be signed under oath. In reporting information required by this form, a City official shall include the same information as it pertains to his or her spouse or domestic partner, by separate listing. However, a separate report for the City official's spouse or domestic partner is not required.</p> | | <input type="checkbox"/> | MAYOR | <input type="checkbox"/> | CITY COUNCIL MEMBER | <input type="checkbox"/> | CITY STAFF/EMPLOYEE | <input checked="" type="checkbox"/> | CANDIDATE | <input type="checkbox"/> | BOARD MEMBER | | | | | | | | | | | | | | |
| <input type="checkbox"/> | MAYOR | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | CITY COUNCIL MEMBER | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | CITY STAFF/EMPLOYEE | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> | CANDIDATE | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | BOARD MEMBER | | | | | | | | | | | | | | | | | | | | | | | | | |

REAL PROPERTY OWNERSHIP OR SALE

PART 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.

| | |
|------------------------------|--|
| 1 STREET ADDRESS OF PROPERTY | ADDRESS CITY STATE ZIP CODE 7600 Clydesdale Drive Austin, TX 78745 |
| 2 DESCRIPTION OF PROPERTY | Home |
| 3 PRESENT USE OF PROPERTY | Home |

4 MEMO

| | |
|----------------------------|--|
| STREET ADDRESS OF PROPERTY | ADDRESS CITY STATE ZIP CODE 2109 Thrasher Ln #3 Austin, TX 78741 |
| DESCRIPTION OF PROPERTY | Home |
| PRESENT USE OF PROPERTY | Rental |

MEMO
This was purchased for family and my brother lives in this home.

BOARDS OF DIRECTORS (MEMBERSHIP & POSITION)

PART 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.)

| | |
|------------------------|-----------------------------|
| 1 NAME OF ORGANIZATION | The Junior League of Austin |
| 2 POSITION HELD | Strategic Planning Chair |

3 MEMO

STATEMENT OF FINANCIAL INFORMATION

PARTS MARKED "NOT APPLICABLE" BY FILER

- N/A Part 1 - Occupation Income
- N/A Part 2 - Self-employment/Professional Corp./Small Business Income
- N/A Part 3 - Non-Occupation Income
- N/A Part 4 - Gifts
- N/A Part 5 - Other Business Ownership/Interests
- N/A Part 6 - Bonds/Notes/Commercial Paper
- N/A Part 7 - Other Income Sources
- N/A Part 8 - Real Property Ownership or Sale
- N/A Part 9 - Real Property, Business Entity
- N/A Part 10 - Loans as Lender/Creditor
- N/A Part 11 - Guarantor/Co-Signer to Loans/Transactions
- N/A Part 12 - Loans/Debts/Financial Liabilities (Personal)
- N/A Part 12b - Loans/Debts/Financial Liabilities (Business)
- N/A Part 13 - Boards of Directors (Membership & Position)

STATEMENT OF FINANCIAL INFORMATION AFFIDAVIT

This information serves as the electronic signature of the person legally responsible for filing this report.

Under penalty of perjury, I swear or affirm that the preceding Financial Statement of Information is in all things true and correct and fully shows all information required to be reported pursuant to City Code Section 2-7-72 for the reporting period indicated.

Stephanie M Bazan

Signature of Filer