

STATEMENT OF FINANCIAL INFORMATION CORRECTION DECLARATION-ANNUAL

OFFICE USE ONLY

Date Received

ELECTRONICALLY FILED
07/19/2023

Receipt #

HD / PM

Amount

Date Processed

Date Imaged

Explanation of Correction: Explain why there were error(s) on the original report, what information is being corrected, and how the new information is different from the information on the original report.

Filer Name (First, MI, Last)

José Velásquez

Account #

00090787

Address (P.O. Box or Street Address, Apt. or Suite #)

(CHECK IF FILER'S HOME ADDRESS)

(City, State, Zip Code)

Explanation of Correction

List East Austin Conservancy as client / source of income.

Under penalty of perjury, I swear or affirm that the information contained in the preceding report is in all things true and correct and that in filing the preceding corrected or updated report, I have accurately explained the reason(s) for the correction or update.

José Velásquez

Signature of Filer

STATEMENT OF FINANCIAL INFORMATION


FORM SFI
COVER SHEET

| | | | | | | | | |
|--|---|--|---------|--------|----------------|--|-------------|--|
| 1 NAME | TITLE; FIRST; MI <p style="text-align: center;">José</p> <hr style="border-top: 1px dashed black;"/> NICKNAME; LAST; SUFFIX <p style="text-align: center;">Velásquez</p> | PAGE # <p style="text-align: center;">8</p> <hr/> ACCOUNT # <p style="text-align: center;">00090787</p> | | | | | | |
| 2 ADDRESS | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP <div style="background-color: black; width: 150px; height: 40px; margin: 5px 0;"></div> <div style="border: 1px solid black; display: inline-block; padding: 2px;">X</div> (CHECK IF FILER'S HOME ADDRESS) | <div style="border: 2px solid black; padding: 5px; text-align: center; font-weight: bold;">OFFICE USE ONLY</div> <hr/> Date Received <p style="text-align: center;">ELECTRONICALLY FILED 07/19/2023</p> <hr/> Receipt # <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-bottom: 1px solid black;">HD / PM</td> <td style="width:50%; border-bottom: 1px solid black;">Amount</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Processed</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black;">Date Imaged</td> </tr> </table> | HD / PM | Amount | Date Processed | | Date Imaged | |
| HD / PM | Amount | | | | | | | |
| Date Processed | | | | | | | | |
| Date Imaged | | | | | | | | |
| 3 Spouse or Domestic Partner whose financial activity you are reporting | | | | | | | | |
| 4 REASON FOR FILING STATEMENT | <div style="margin-bottom: 10px;"> <input type="checkbox"/> MAYOR <input checked="" type="checkbox"/> CITY COUNCIL MEMBER <input type="checkbox"/> CITY STAFF/EMPLOYEE <input type="checkbox"/> CANDIDATE <input type="checkbox"/> BOARD MEMBER </div> <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, 2022.</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> | | | | | | | |

OCCUPATION INCOME

PART 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.

| | |
|--|---|
| 1 NAME OF EMPLOYER OR SOURCE OF INCOME | Self |
| 2 BUSINESS ADDRESS |  ADDRESS CITY STATE ZIP CODE |
| 3 NATURE OF OCCUPATION OR BUSINESS | Marketing |
| 4 CATEGORY OR AMOUNT | <input type="checkbox"/> At least \$1 but less than \$10,000 <input type="checkbox"/> At least \$10,000 but less than \$20,000 <input type="checkbox"/> At least \$20,000 but less than \$50,000 <input checked="" type="checkbox"/> At least \$50,000 but less than \$75,000 <input type="checkbox"/> At least \$75,000 but less than \$100,000 <input type="checkbox"/> \$100,000 or more, report to nearest \$100,000 <input type="checkbox"/> Enter an Amount |

| | |
|--------|---|
| 5 MEMO | I am self-employed and do consulting work as JMAV Strategies. |
|--------|---|

LOANS/DEBTS/FINANCIAL LIABILITIES (PERSONAL)

PART 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.

| | |
|-----------------------------------|---|
| 1 NAME OF LENDER/CREDITOR/OBLIGEE | UFCU |
| 2 RATE OF INTEREST, IF ANY | 9 |
| 3 DATE OBLIGATION WAS INCURRED | 2021-09-14 |
| 4 CATEGORY OR AMOUNT | <input checked="" type="checkbox"/> At least \$1 but less than \$10,000 <input type="checkbox"/> At least \$10,000 but less than \$20,000 <input type="checkbox"/> At least \$20,000 but less than \$50,000 <input type="checkbox"/> At least \$50,000 but less than \$75,000 <input type="checkbox"/> At least \$75,000 but less than \$100,000 <input type="checkbox"/> \$100,000 or more, report to nearest \$100,000 <input type="checkbox"/> Enter an Amount |

5 MEMO

| | |
|---------------------------------|---|
| NAME OF LENDER/CREDITOR/OBLIGEE | US Department of Educaition |
| RATE OF INTEREST, IF ANY | 5 |
| DATE OBLIGATION WAS INCURRED | 2008-10-28 |
| 4 CATEGORY OR AMOUNT | <input type="checkbox"/> At least \$1 but less than \$10,000 <input type="checkbox"/> At least \$10,000 but less than \$20,000 <input checked="" type="checkbox"/> At least \$20,000 but less than \$50,000 <input type="checkbox"/> At least \$50,000 but less than \$75,000 <input type="checkbox"/> At least \$75,000 but less than \$100,000 <input type="checkbox"/> \$100,000 or more, report to nearest \$100,000 <input type="checkbox"/> Enter an Amount |

MEMO

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 | Chingona Fest Texas |
| 2 POSITION HELD | Board Member |

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.

José Velásquez

Signature of Filer