

**City of San Marcos
City Council/Council Appointee/P&Z Commissioner
Annual Financial Disclosure Form**

NOTES

1. This report covers the reporting period from: January 1, 2019-December 31, 2019
2. Do **not** leave items blank. If item is not applicable, mark NA or NONE.
3. Attach information on additional pages, if necessary.

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MAY - 5 2020

Name: Saul Gonzales City of San Marcos
 Residence address: 816 Stagecoach Trail San Marcos, TX 78666 City Attorney's Office
 Title of position held with the City: City Councilman Place 2
 Name of spouse: Ramona Gonzales NA or NONE
 Names of all dependent children: Sariah Faith Gonzales NA or NONE

Names under which you, your spouse, or any of your dependent children do business: NA or NONE

1. _____
2. _____
3. _____

NOTE – You may use the following reporting categories to describe amounts and values:

Category I – At least \$100.00 but less than \$10,000.00
Category II – At least \$10,000.00 but less than \$20,000.00
Category III – At least \$20,000.00 but less than \$50,000.00
Category IV – At least \$50,000.00 but less than \$75,000.00
Category V – At least \$75,000.00 but less than \$100,000.00
Category VI – \$100,000.00 or more – MUST report to nearest \$100,000.00 (For example: \$125,000 would be reported to \$100,000)

1. Identify each source of income amounting to more than \$100.00 received in the reporting period by you, your spouse, or any of your dependent children: NA or NONE

Name & full address of income source	Nature of income [e.g., salary, dividends, rent, etc.]	Amount of income [by reporting category]	Income of [e.g., self, spouse, or dependent child]
Central Texas Medical Center 1301 Wonder World San Marcos, TX 78666	Salary	Category III	Self
City of San Marcos 630 E. Hopkins San Marcos, TX 78666	Salary	Category III	Self
Caregiver of Grandchildren 816 Stagecoach Trail San Marcos, TX 78666	Salary	Category I	Spouse

2. Identify each option held, owned, acquired or sold by you, your spouse, or any of your dependent children during the reporting period: NA or NONE

Nature of option [real estate, stock, etc.]	Amount of transaction [by reporting category]	Name & full address of other parties to the transaction

3. Identify each business entity, nonprofit entity or union in which you, your spouse, or any of your dependent children was a partner, manager, officer, member of the board of directors, proprietor or beneficiary during the reporting period: NA or NONE

Name & full address of business or nonprofit entity or union	Position held

4. Identify each business entity, nonprofit entity or union in which you, your spouse, or any of your dependent children had an ownership interest with a fair market value of more than \$100.00 at any time during the reporting period: NA or NONE

Name & full address of business or nonprofit entity or union	Description of ownership interest [e.g., owner, partner, stockholder]	Value of ownership interest [by reporting category]	Number of shares held/shares issued [if applicable]	Net gain or loss from sale of stock [by reporting category]

5. Identify any real property in the City or ETJ in which you, your spouse, or any of your dependent children had an interest as owner, beneficial owner (holder of a mortgage), business owner (partner in a partnership; or board member, officer or owner of more than 5% of stock of a corporation), or a leaseholder:

NA or NONE

Full address or legal description	Name & full address of owner(s) [if other than you, your spouse or children]	Fair market value [by reporting category] and present use	For leased property, annual rental amount [by reporting category]	Homestead exemption on this property?
Willow Creek Lot 148 1.05 Acres		Category VI \$200,000	N/A	Yes
Conway 1, Block 1 Lot 9		Category VI \$100,000	Category I	No
611 Barbara Dr. San Marcos, TX 78666		Category VI \$100,000	Category I	No

6. Identify persons, business entities or guarantors to whom you, your spouse, or any of your dependent children owed a debt of more than \$100.00 during the reporting period (not including debts owed to persons related within the second degree of consanguinity or affinity, or loans to a political campaign which were reported as required by law):

NA or NONE

Name & full address of person, business entity or guarantor to which debt was owed	Amount of debt [by reporting category]	Amount of repayment during reporting period [by reporting category]
AHRP AON PO Box 1495 Lincolnshire, Illinois 60069-1495	Category I	Category I
Wells Fargo PO Box 54180 Los Angeles, CA 90054-0180	Category IV	Category II
Discover Card PO Box 790213 St. Louis, MO 63179-0213	Category II	Category I

7. Provided this information is not privileged by law, identify persons, business entities or guarantors who owed you, your spouse, or any of your dependent children a debt of more than \$100.00 during the reporting period (not including debts owed by persons related within the second degree of consanguinity or affinity):

NA or NONE

Name & full address of person, business entity or guarantor that owed the debt	Amount of debt [by reporting category]	Amount of repayment during reporting period [by reporting category]

Name & full address of person, business entity or guarantor that owed the debt	Amount of debt [by reporting category]	Amount of repayment during reporting period [by reporting category]

8. Identify the source of each gift or accumulation of gifts from one source of more than \$100.00 in value received during the reporting period by you, your spouse, or any of your dependent children, or received by another person for the use and benefit of you, your spouse, or any of your dependent children (not including (1) a gift received from a relative if given because of kinship, or (2) a gift received by will, by intestate succession or as distribution from an inter vivos or testamentary trust established by a spouse or ancestor): NA or NONE

Name & full address of source of gift(s)	Description of gift(s)	Amount or value of gift(s) [by reporting category]

9. Provided this information is not privileged by law, if you were the owner of 5% or more of any business entity during the reporting period, list all customers from whom the entity received at least 10% of its gross income during the reporting period: NA or NONE

Name & full address of customer

10. Identify any financial interest in any franchisee of the City held during the reporting period by you, your spouse, or any of your dependent children [note: franchise holders are A)Time Warner Cable, B) Pedernales Electric Cooperative, C) Bluebonnet Electric Cooperative, and D) CenterPoint Energy Entex]:

NA or NONE

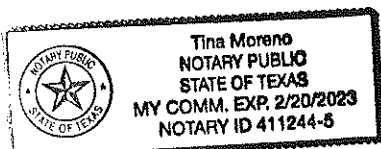
Name of franchise holder	Description of financial interest held [stock, mortgage, note etc.]	Value of financial interest [by reporting category]

11. Identify any transaction during the reporting period by you, your spouse, or any of your dependent children with any holder of any franchise issued by the City, other than as a customer or patron:

NA or NONE

Name of franchise holder	Description of transaction	Value of transaction [by reporting category]

AFFIDAVIT I swear under penalty of perjury that the above statement is true and correct. I acknowledge that the disclosure applies to a family member (as defined by Section 176.001(2), Local Government Code) of this local government officer. I also acknowledge that this statement covers the 12-month period described by Section 176.003(a), Local Government Code.



Saul Gonzales
 Signature of Local Government Officer/Appointed Official

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said SAUL GONZALES, this the 5TH day of MAY, 20 20, to certify which, witness my hand and seal of office.

Tina Moreno
 Signature of officer administering oath

TINA MORENO
 Printed name of officer administering oath

ADMINISTRATIVE COORD.
 Title of officer administering oath

Question # 1

Name and Full Address of Income Source	Nature of Income (e.g. salary, dividends, rent, etc.)	Amount of Income (by reporting category)	Income of (e.g. self, spouse, or dependent child)
701 Center Street San Marcos, TX 78666	Rent	Category I	Self/Spouse
230 Uhland Road San Marcos, TX 78666	Rent	Category I	Self/Spouse
323 Roosevelt San Marcos, TX 78666	Rent	Category I	Self/Spouse
611 Barbara Drive San Marcos, TX 78666	Rent	Category I	Self/Spouse
106 Whisper Circle Kyle, TX 78640	Rent	Category I	Self/Spouse
326 Camacho Street San Marcos, TX 78666	Rent	Category I	Self/Spouse

Question #5

Full Address or legal description	Name & Full Address of owner(s) [If other than you, your spouse, or children]	Fair Market Value [by reporting category] and present use	For leased property, annual rental amount [by reporting category]	Homestead exemption on this property?
GreenDale #1 69-13 Lot 5, Block 1 GEO# 339930742860		Category V	Category I	No
Victory Gardens Block 10, Lot 4-5 Acres; 0.1148		Category IV	Category I	No
Victory Gardens #1 51-105 Lot 2-3 Block 11 GEO# 90208227		Category II	Category I	No
AM Ramsay Lot 51 Acres 0.2966		Category IV	Category I	No
BW Breeding PT Lot M BLK 4		Category IV	Category I	No

Question #6

Name and Full address of person, business entity or guarantor to which debt was owed	Amount of debt (by reporting category)	Amount of repayment during reporting period (by reporting category)
Randolph Brooks Federal Credit Union PO Box 2097 Universal City, TX 78148-2097	Category IV	Category I
Randolph Brooks Federal Credit Union PO Box 2097 Universal City, TX 78148-2097	Category I	Category I