

REPORT OF FINANCIAL INFORMATION

Filed Pursuant to Section 2-340 et seq.
Corpus Christi Code of Ethics
(Revised May 6, 2025, pursuant to Ethics Ordinance Change)

Report Type: *

- ☐ Annual Report for Year Ending December 31, 2024. (Due by last Friday of March 2025)
- ☐ Supplemental Report for Six Months Ending June 30, 2025. (Due by last Friday of July 2025)
- ☐ Candidate's Report for Year Ending December 31, 2025. (Due 3 days after filing for office)

INSTRUCTIONS:

PAPER FILERS: Filers may print a PDF version of this Report of Financial Information, complete it, and PHYSICALLY FILE IT WITH THE CITY SECRETARY BY 4:45P.M.ON THE DAY REQUIRED FOR FILING.

Ethics Report Filing *

☐ New Filing

☐ Amended Filing

As used herein "Reporting Official" includes "Candidate".

REPORTING OFFICIAL:

Select One: *



Title of Reporting Official: *

INDIVIDUAL REQUIRED TO FILE:

Last Name: *

Enter Last Name

First Name: *

Enter First Name

Middle Initial:

Enter Middle Initial

Address of Residence: *

Number, Street, Unit

City: *

State: *

Zip: *

The report shall include all of the following information for the reporting official and the reporting official's spouse, but information relating to the spouse need not be segregated from that relating to the reporting official.

PART I. LICENSES

Do you or your spouse have any professional, occupational or business licenses? *

☐ Yes ☐ None

List all professional, occupational or business licenses held by the reporting official. *
If this question does not pertain to you, the only acceptable answer is "NONE".

PART II. BUSINESSES

List all the names of any businesses with which the reporting official was actively engaged or associated, and the principal address and phone number of each, together with the position or title held. You are not required to include any businesses which are reported in other sections of this Report.

Do you or your spouse engage in any business that meets this criteria? If yes, please list the Title, Business Name, Address and Phone Number of each business.*

If this question does not pertain to you, the only acceptable answer is "NONE".

PART III. INCOME

1. Sources of Income

List the names and addresses of all sources of income (including pay from the City of Corpus Christi) which exceeds 10 percent of the reporting official's gross income or \$5,000 in salary, bonuses, commissions or professional fees, or \$20,000 in payment for goods, products or non-professional services.

Do you or your spouse have any income that meets this criteria? *

☐ Yes ☐ None

2. Clients or Customers

If the reporting official is self-employed or owns or controls at least a 20 percent interest in a partnership, corporation or other entity through which the reporting official does business, you must also report the names and addresses of the clients or customers who do business with the City from whom the reporting official, partnership, corporation or other entity received at least 10 percent of its gross income. The City publishes a Sources of Income List the names and addresses of all sources of income (including pay from the City of Corpus Christi) which exceeds 10 percent of the reporting official's gross income or \$5,000 in salary, bonuses, commissions or professional fees, or \$20,000 in payment for goods, products or non-professional services. Clients or Customers If the reporting official is self-employed or owns or controls at least a 20 percent interest in a partnership, corporation or other entity through which the reporting official does business, you must also report the names and addresses of the clients or customers who do business with the City from whom the reporting official, partnership, corporation or other entity received at least 10 percent of its gross income. The City publishes a list of those persons "who do business with the City" which you may rely upon for the purposes of this provision. (A sole proprietor shall not be required to report a source of income he or she would not have to report if operating as a corporation or partnership.) of those persons "who do business with the City" which you may rely upon for the purposes of this provision. (A sole proprietor shall not be required to report a source of income he or she would not have to report if operating as a corporation or partnership.)

Do you or your spouse have any income that meets this criteria? *

☐ Yes ☐ None

Use this section to answer questions 1 and 2 above, if needed.

If you answered the previous question as yes, please list the names and addresses below.* If this question does not pertain to you, the only acceptable answer is "NONE".

PART IV. BUSINESS ORGANIZATIONS

List the name and address of any business organization* in which the reporting official held, owned, acquired or sold stock or other equity ownership having a value exceeding \$5,000 or equivalent to 10 percent or more of the stock or equity in the entity or owns 10% or more or \$5,000 or more of the fair market value of the business organization or funds received from business organization exceed 10% or more of the person's gross income for the previous year.

*"Business organization" includes a corporation, general partnership limited partnership, joint venture, trust or sole proprietorship.

Do you or your spouse have a relationship with any business organizations that meet this criteria? *

☐ Yes ☐ None

If you answered the previous question as yes, please list the entity, address and date below.*

If this question does not pertain to you, the only acceptable answer is "NONE".

PART V. REAL PROPERTY OF THE ELECTRONIC FINANCIAL DISCLOSURE FORM

List all real property in Nueces County or any adjoining county in which the reporting official held any legal or equitable ownership with a fair market value of \$2,500 or more (including your personal home). The list shall include a description sufficient to locate the property, preferably the physical address of the real property.

* "Real Property" includes land, buildings, improvements, mineral interests and leasehold estates, whether such property is owned by the official or by another as trustee for the official.

Do you or your spouse have any property that meets this criteria? *

☐ Yes ☐ No

If you answered the previous question as yes, please list the street address, city, state, and zip code below.*
If this question does not pertain to you, the only acceptable answer is "NONE".

PART VI. PERSONAL LIABILITIES

List the name and address of any person to whom the reporting official was indebted in excess of \$10,000 together with the dates any such debts were incurred. "Indebted" includes obligations on which the reporting official is a guarantor or co-signer, in which case the names of the borrower and lender shall be listed. ("Person" is defined in Section 2-341 as "an individual, proprietorship, firm, partnership, joint venture, syndicate, trust, company, corporation, association, committee, estate, receiver, entity or any other organization or group of persons acting in concert, whether profit or nonprofit.")

Do you or your spouse have any Personal liabilities that meet this criteria? *

☐ Yes ☐ No

If you answered the previous question as yes, please list the names, addresses, and dates below. *

If this question does not pertain to you, the only acceptable answer is "NONE".

PART VII. NOTES, BONDS & LOANS OWED TO YOU

If you have made a note, loans, or bond to any person or entity that is still outstanding and in excess of 10,000 dollars in the aggregate, then please list the name and address of each borrower with the date of such loan or obligation.

Do you or your spouse have any Notes, Bonds or Loans that meet this criteria? *

☐ Yes ☐ No

If you answered the previous question as yes, please list the names, addresses, and dates below. *

If this question does not pertain to you, the only acceptable answer is "NONE".

PART VIII. CONTRACTS WITH THE CITY OF CORPUS CHRISTI

List all contracts with the City of Corpus Christi, including the date, term, type of good or services provided and the amount of the contract.

Do you or your spouse have any Contracts with the City of Corpus Christi that meet this criteria? *

☐ Yes ☐ No

If you answered the previous question as yes, please list the date, term, type of service, and contract amount below. * If this question does not pertain to you, the only acceptable answer is "NONE".

PART IX. POSITIONS AND BOARDS

List all board of directors or governing bodies of which the reporting official is a member, and all offices or executive positions the reporting official holds in corporations, partnerships, limited partnerships, professional corporations, associations or other entities, including non-business and non-profit entities, stating the name of each entity and position held, and excluding entities owned or created by the city.

Do you or your spouse have any Positions that meet this criteria? *

☐ Yes ☐ No

If you answered the previous question as yes, please the name and position below. *

If this question does not pertain to you, the only acceptable answer is "NONE".

PART X. GIFTS AND FAVORS

List the name and address of any persons from whom the reporting official received gifts or favors, including but not limited to trips, excursions, food, lodging, money, commodities or services, cumulatively exceeding \$200 in value. The nature and date of each gift received shall be specified. Provided, however, campaign contributions reported as required by state law and gifts or favors from relatives need not be reported hereunder.

“Relative” includes spouse, father, mother, brother, sister, son, daughter, spouse’s children, grandfather, grandmother, son-in-law, daughter-in-law, uncle, aunt, nephew, niece, grandson, granddaughter, first cousin, father in-law, mother-in-law, brother-in-law, sister-in-law, grandfather-in-law, grandmother-in-law, uncle by marriage, aunt by marriage, nephew’s wife, niece’s husband, grandson-in-law, granddaughter-in-law, first cousin’s spouse, adoptive relationships being treated as natural.

Have you or your spouse received any gifts or favors that meets this criteria? *

☐ Yes ☐ No

If you answered the previous question as yes, please list the names and addresses below.*

If this question does not pertain to you, the only acceptable answer is "NONE".

PART XI. CONFLICT OF INTEREST

Does the reporting official, or any of his or her immediate family, (spouse, parent, sibling, child) have a personal, professional, or financial interest in any entity, contract, or business, or a personal or financial relationship, that in any way poses a conflict of interest, which would affect the impartial performance of his or her duties for the City of Corpus Christi?

Do you or your spouse have any business or personal relationships that might present a conflict of interest? *

☐ Yes ☐ No

In the box below, describe any such conflicts and actions being taken to resolve or avoid the conflicts.

VERIFICATION

I do solemnly swear that the foregoing Report, filed herewith, is in all things true and correct, and fully shows all information required to be reported by me pursuant to the City of Corpus Christi Code of Ethics, Section 2-340 et seq.

SIGNATURE OF OFFICIAL *

DATE

Date will be captured on form submission

☐ By clicking this box, I swear or affirm that the statements contained in this Financial Disclosure Report are true, correct and complete.
