

CITY OF ROUND ROCK, TEXAS  
CITY OFFICIAL  
FINANCIAL DISCLOSURE STATEMENT  
FOR THE REPORTING PERIOD

REC'D  
FEB 02 2015

~~2013~~ 2014

(Year)

This form is required to be completed by every candidate who declares for any office of the City to be filled by election:

***This statement is due within fifteen (15) days of the date the candidate declares his candidacy.***

This statement is required by Chapter 2, Article III of the Round Rock City Code. Please refer to section 2-120 for specific requirements and to section 2-117 for definition of terms.

Where additional space is required, please attach separate pages.

Please fill in all blanks. If a requested item does not apply, write "N/A."

FINANCIAL DISCLOSURE FOR: 2013

A. Name of Candidate: Writ Baese  
Office Sought: Round Rock City Council Place 5  
Residence Address: 2721 Loyaga  
Round Rock, TX 78681  
Business Address: PO Box 696, Round Rock, TX 78680

Telephone Numbers:  
Home: ( )  
Work: ( )  
Cell: (512) 917-2222

Name of Spouse: Kimberly Baese  
Tyler Baese  
Trevor Baese

Name(s) of all dependent minor children:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name(s) under which you, your spouse, and/or your dependent minor children do business:  
Hill Country Payroll, LLC  
Baese Management, Inc.  
\_\_\_\_\_  
\_\_\_\_\_

B. Identify by street address, and legal description, all real property located within the City of Round Rock or its extraterritorial jurisdiction in which you have a substantial interest.

1. Identification of property: 2721 Loyaga, Round Rock, TX 78681  
Wood Glen, Sec 4 P# 1, Block 13, Lot 26

2. Identification of property: \_\_\_\_\_

3. Identification of property: \_\_\_\_\_

4. Identification of property: \_\_\_\_\_

5. Identification of property: \_\_\_\_\_

(attach separate page if necessary)

C. Identify each business entity owning property or doing business within the City of Round Rock or its extraterritorial jurisdiction in which you have a substantial interest:

1. Name of entity: Hill Country Payroll, LLC  
Address of entity's principal place of business: 1293 Common Street  
New Braunfels, TX 78130  
Type of entity (corporation, partnership, etc.): LLC  
Date of existence: 2000  
State of incorporation (if applicable): \_\_\_\_\_  
Names of partners or trustees (if any): Coby Baese, Cale Baese
  
2. Name of entity: Baese Management, Inc.  
Address of entity's principal place of business: 1293 Common Street  
New Braunfels, TX 78130  
Type of entity (corporation, partnership, etc.): Corporation  
Date of existence: December 2011  
State of incorporation (if applicable): Texas  
Names of partners or trustees (if any): Coby Baese, Cale Baese
  
3. Name of entity: \_\_\_\_\_  
Address of entity's principal place of business: \_\_\_\_\_  
Type of entity (corporation, partnership, etc.): \_\_\_\_\_  
Date of existence: \_\_\_\_\_  
State of incorporation (if applicable): \_\_\_\_\_  
Names of partners or trustees (if any): \_\_\_\_\_

(attach separate page if necessary)

D. Identify each person or business entity to whom you, your spouse, or your dependent minor children owe a debt of \$10,000.00 or more, but not including debts owed to persons related within the second degree of consanguinity or affinity and excluding loans to a political campaign which were reported or required by law:

1. Name of person or business entity: Wells Fargo Mortgage

Address: PO Box 14111, Des Moines, IA 50306

If repaid during reporting period, date of repayment: \_\_\_\_\_

2. Name of person or business entity: Bank of America Auto Loans

Address: PO Box 15220, Wilmington, DE 19886

If repaid during reporting period, date of repayment: \_\_\_\_\_

3. Name of person or business entity: Discover Card Services

Address: PO Box 6103, Carol Stream, IL 60197

If repaid during reporting period, date of repayment: \_\_\_\_\_

4. Name of person or business entity: \_\_\_\_\_

Address: \_\_\_\_\_

If repaid during reporting period, date of repayment: \_\_\_\_\_

5. Name of person or business entity: \_\_\_\_\_

Address: \_\_\_\_\_

If repaid during reporting period, date of repayment: \_\_\_\_\_

6. Name of person or business entity: \_\_\_\_\_

Address: \_\_\_\_\_

If repaid during reporting period, date of repayment: \_\_\_\_\_

(attach separate page if necessary)

E. Identify each source of income amounting to ten percent (10%) or more of your or your spouse's or your dependent minor children's gross annual income.

1. Name of source: Hill Country Payroll LLC  
Source's address: 1293 Common Street  
New Braunfels, TX 78130  
Type of entity (if applicable): LLC  
Date entity came into existence (if applicable): 2000  
State of incorporation (if applicable): \_\_\_\_\_  
Names of partners or trustees (if applicable): Coby Baese, Cale Baese

2. Name of source: Baese Management, Inc.  
Source's address: 1293 Common Street  
New Braunfels, TX 78130  
Type of entity (if applicable): Corporation  
Date entity came into existence (if applicable): Dec 2011  
State of incorporation (if applicable): TX  
Names of partners or trustees (if applicable): Coby Baese, Cale Baese

3. Name of source: \_\_\_\_\_  
Source's address: \_\_\_\_\_  
Type of entity (if applicable): \_\_\_\_\_  
Date entity came into existence (if applicable): \_\_\_\_\_  
State of incorporation (if applicable): \_\_\_\_\_  
Names of partners or trustees (if applicable): \_\_\_\_\_

(attach separate page if necessary)

F. Identify the donor of each gift of more than one hundred fifty dollars (\$150.00) in value received by you or your spouse or your dependent minor children, including the value of the gift, where such donor has appeared before and requested action of the City Council during the reporting period.

1. Recipient of gift: NA

Value of gift: \_\_\_\_\_

Name of source: \_\_\_\_\_

Address of source: \_\_\_\_\_

Type of entity (if applicable): \_\_\_\_\_

Date entity came into existence (if applicable): \_\_\_\_\_

State of incorporation (if applicable): \_\_\_\_\_

Names of partners or trustees (if applicable): \_\_\_\_\_

2. Recipient of gift: \_\_\_\_\_

Value of gift: \_\_\_\_\_

Name of source: \_\_\_\_\_

Address of source: \_\_\_\_\_

Type of entity (if applicable): \_\_\_\_\_

Date entity came into existence (if applicable): \_\_\_\_\_

State of incorporation (if applicable): \_\_\_\_\_

Names of partners or trustees (if applicable): \_\_\_\_\_

(attach separate page if necessary)

G. Identify the donor of two or more gifts of an accumulated value of six hundred dollars (\$600.00) or more received by you, your spouse, or your dependent minor children, including the value of the gift, where such donor has appeared before and requested action of the City Council during the reporting period.

1. Recipient of gift: NA

Value of gift: \_\_\_\_\_

Name of source: \_\_\_\_\_

Address of source: \_\_\_\_\_  
\_\_\_\_\_

Type of entity (if applicable): \_\_\_\_\_

Date entity came into existence (if applicable): \_\_\_\_\_

State of incorporation (if applicable): \_\_\_\_\_

Names of partners or trustees (if applicable): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Recipient of gift: \_\_\_\_\_

Value of gift: \_\_\_\_\_

Name of source: \_\_\_\_\_

Address of source: \_\_\_\_\_  
\_\_\_\_\_

Type of entity (if applicable): \_\_\_\_\_

Date entity came into existence (if applicable): \_\_\_\_\_

State of incorporation (if applicable): \_\_\_\_\_

Names of partners or trustees (if applicable): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(attach separate page if necessary)

H. Identify all individuals or business entities that (1) you or a business entity in which you have a substantial interest have had business dealings involving one or more transactions of \$500.00 or more each, for a total of \$2,500.00 or more and (2) have appeared before and requested action of the City Council during the reporting period. (Identification shall include individuals who have an ownership interest of twenty-five percent (25%) or more in a business entity which you have had business dealings involving \$2,500.00 or more and who appeared before and requested some action on the part of the City Council, even though the action does not concern such business entity.)

1. Name of individual or business entity: Round Rock Chamber of Commerce

Address: 211 E. Main, Round Rock, TX 78664

Type of entity (if applicable): Non Profit

Date entity came into existence (if applicable): 1978

State of incorporation (if applicable): TX

Names of partners or trustees (if applicable): \_\_\_\_\_

2. Name of individual or business entity: \_\_\_\_\_

Address: \_\_\_\_\_

Type of entity (if applicable): \_\_\_\_\_

Date entity came into existence (if applicable): \_\_\_\_\_

State of incorporation (if applicable): \_\_\_\_\_

Names of partners or trustees (if applicable): \_\_\_\_\_

(attach separate page if necessary)

Signed this 2nd day of February, 2014. <sup>SMW</sup>

Writ Baese

(signature)

Writ Baese

(print or type name)

VERIFICATION

STATE OF TEXAS §

§

COUNTY OF WILLIAMSON §

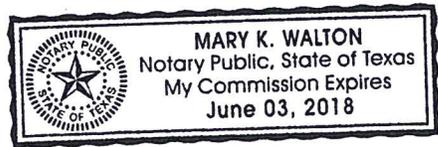
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BEFORE ME, the undersigned Notary Public, on this day personally appeared Writ Baese, known to me, and after being duly

sworn, stated on oath that the foregoing and annexed Financial Disclosure for 2013 <sup>SMW</sup>

is within the knowledge of affiant and is true and correct.

SWORN TO AND SUBSCRIBED TO BEFORE ME on this 2nd day of February, 2014. <sup>SMW</sup>



Mary K Walton

Notary Public, State of Texas

Printed Name: Mary K Walton

My Commission Expires: 6-3-18