

CITY OF ROUND ROCK, TEXAS
CITY OFFICIAL
FINANCIAL DISCLOSURE STATEMENT
FOR THE REPORTING PERIOD
2013
(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."

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: 2508 Merion Cove, Round Rock Tx

2. Identification of property: 1902 Oakview Dr Round Rock Tx

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: None
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): _____

2. 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): _____

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: Nation Star Mortgage

Address: P.O. Box 650783 Dallas TX 75265-0783

If repaid during reporting period, date of repayment: _____

2. Name of person or business entity: _____

Address: _____

If repaid during reporting period, date of repayment: _____

3. Name of person or business entity: _____

Address: _____

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: Qualcomm Inc
Source's address: 5775 Morehouse Drive
SAN Diego CA 92121
Type of entity (if applicable): Corporation
Date entity came into existence (if applicable): 1985
State of incorporation (if applicable): CA
Names of partners or trustees (if applicable): Public

2. Name of source: The College of Health Care Professions
Source's address: 6505 Airport Blvd #102 Austin TX

Type of entity (if applicable): College
Date entity came into existence (if applicable): 1988
State of incorporation (if applicable): TX
Names of partners or trustees (if applicable): _____

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: None
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: None
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: HEB

Address: GATTis School Road

Type of entity (if applicable): UNKNOWN

Date entity came into existence (if applicable): _____

State of incorporation (if applicable): _____

Names of partners or trustees (if applicable): _____

2. Name of individual or business entity: Lowes

Address: Louis Henna Blvd

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 9th day of December, 2014.

Chris Koob
(signature)

Christopher Koob
(print or type name)

VERIFICATION

STATE OF TEXAS §
 §
COUNTY OF WILLIAMSON §

BEFORE ME, the undersigned Notary Public, on this day personally appeared Chris Koob, known to me, and after being duly sworn, stated on oath that the foregoing and annexed Financial Disclosure for 2013 is within the knowledge of affiant and is true and correct.

SWORN TO AND SUBSCRIBED TO BEFORE ME on this 9th day of December, 2014.



Sara L. White
Notary Public, State of Texas
Printed Name: Sara Leigh White
My Commission Expires: July 11, 2016