

City of San Marcos  
City Clerk's Office  
Annual Financial Disclosure Form

Notes: 1. This report covers the reporting period from January 1, 2008 to December 31, 2008.  
2. Attach information on additional pages if necessary.

Name: Susan Clifford Narvaiz

Residence address: 1507 Parkview Lane  
San Marcos, TX 78666

Title of position held with the City: Mayor

Name of spouse (if applicable): Miguel (Mike) Narvaiz, Jr.

Names of all dependent children (if applicable): N/A

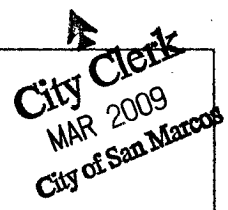
**SCANNED**

Names under which you, your spouse, or any of your dependent children do business: MAR 13 2009

1. Susan Lea Narvaiz
2. Core Strategies, Inc
3. \_\_\_\_\_

Note - You may use the following reporting categories to describe amounts and values:

|                    |                                                     |
|--------------------|-----------------------------------------------------|
| (1) Category I -   | At least \$100.00 but less than \$10,000.00         |
| (2) Category II -  | At least \$10,000.00 but less than \$20,000.00      |
| (3) Category III - | At least \$20,000.00 but less than \$50,000.00      |
| (4) Category IV -  | At least \$50,000.00 but less than \$75,000.00      |
| (5) Category V -   | At least \$75,000.00 but less than \$100,000.00     |
| (6) Category VI -  | \$100,000.00 or more - report to nearest \$100,000. |

  
 City Clerk  
 MAR 2009  
 City of San Marcos

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:

| Name, address of income source                                                   | Nature of income (e.g., salary, dividends, rent, etc.) | Amount of income (by reporting category) |
|----------------------------------------------------------------------------------|--------------------------------------------------------|------------------------------------------|
| <u>LIA LEASING - The Sedona Group</u><br><u>612 Valley View, Moline IL 61625</u> | <u>Contractor - 1099</u>                               | <u>IV</u>                                |
| <u>TB Woods</u><br><u>404 N 5th Ave Chambersburg, PA 17201</u>                   | <u>Salary - Mike</u>                                   | <u>III</u>                               |
|                                                                                  |                                                        |                                          |

2. Identify each option held, owned, acquired or sold by you, your spouse, or any of your dependent children during the reporting period:

| Nature of option (real estate, stock, etc.) | Amount of transaction (by reporting category) | Name, 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:

| Name, address of business or nonprofit entity or union | Position held |
|--------------------------------------------------------|---------------|
| PLEASE see attached:                                   |               |
|                                                        |               |
|                                                        |               |

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:

| Name, 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/ number of shares issued (if applicable) | Net gain or loss from sale of stock (by reporting category) |
|-----------------------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------------|
| Core Strategies Inc<br>102 Wonder World<br>San Marcos, TX 78666 | Owner                                                                 | III                                                 | 1000/1000                                                      | —                                                           |
|                                                                 |                                                                       |                                                     |                                                                |                                                             |
|                                                                 |                                                                       |                                                     |                                                                |                                                             |

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:

| Address or legal description               | Name, 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? |
|--------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------|---------------------------------------|
| 1507 Parkview Lane<br>SAN MARCOS, TX 78666 |                                                                        | VI                                                        | NA                                                                | yes                                   |
|                                            |                                                                        |                                                           |                                                                   |                                       |
|                                            |                                                                        |                                                           |                                                                   |                                       |

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):

| Name, 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) |
|------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------|
| see attached                                                                 |                                        |                                                                     |
|                                                                              |                                        |                                                                     |
|                                                                              |                                        |                                                                     |

#3  
1

City Boards or Commissions:

- Economic Development San Marcos Board, 202 N. CM Allen Parkway, San Marcos, TX 78666
- San Marcos Finance & Audit Committee, 630 E. Hopkins, San Marcos, TX 78666
- Hays Caldwell Public Utility Agency, Chair, 101 W. Center Street, Kyle, TX 78640
- San Marcos-Hays County EMS Board, Vice Chair, Hays County, TX
- City of San Marcos TIRZ 2, 630 E. Hopkins, San Marcos, TX 78666
- City of San Marcos TIRZ 3, 630 E. Hopkins, San Marcos, TX 78666

Regional Boards or Committee:

- Capital Area Council of Governments Past Chair (6800 Burnison Road, Building 310, San Antonio, TX 78241)
- National League of Cities FAIR Policy Committee, Washington DC
- Intergovernmental Relations Task Force (TML), 1821 Rutherford, Austin, Texas
- Texas Municipal League Higher Education Committee, 1821 Rutherford, Austin, Texas
- CAMPO Transportation Policy Board P.O. Box 1088, Austin, Texas 78767
- Texas Highway Commission I 35 Advisory Committee, Austin, Texas
- Clean Air Force of Central Texas, Austin, Texas
- Envision Central Texas, 6800 Burnison Road, Austin, Texas 78741
- Capital Area Council of Governments, 6800 Burnison Road, Austin, Texas 78744

#6

|                                                      |     |  |
|------------------------------------------------------|-----|--|
| GMAC Mortgage P.O. Box 79135, Phoenix, AZ 85062      | V   |  |
| Ozona Nat'l Bank, P.O.Box 528, Wmberley, TX 78676    | III |  |
| Frost Nat'l Bank San Marcos, TX 78666                | III |  |
| GMAC P.O. Box 4601 Houston TX 77210                  | II  |  |
| Wells Fargo Visa PO Box 30086 Los Angeles, CA 90030  | I   |  |
| HSBC Card PO Box 60102 City of Industry, CA 91716    | I   |  |
| Best Buy PO Box 60102 City of Industry, CA 91716     | I   |  |
| Target Minneapolis. Minnesota                        | I   |  |
| HSBC Group P.O. Box 60101 City of Industry, CA 91716 | I   |  |
| Sam's Club Bentonville, AK                           | I   |  |
| Juniper Visa Dublin, OH                              | 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):

| Name, 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):

| Name, 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 ten per cent of its gross income during the reporting period:

| Name, address of customer |
|---------------------------|
|                           |
|                           |
|                           |

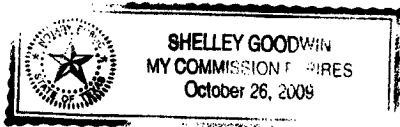
10. Identify any financial interest in any franchisee of the City held during the reporting period by you, your spouse, or any of your dependent children (note: franchise holders are A)Time Warner Cable, B) Pedernales Electric Cooperative, C) Bluebonnet Electric Cooperative, and D) CenterPoint Energy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

| 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:

| Name of franchise holder | Description of transaction | Value of transaction (by reporting category) |
|--------------------------|----------------------------|----------------------------------------------|
|                          |                            |                                              |
|                          |                            |                                              |
|                          |                            |                                              |

AFFIDAVITI 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.



Susan Narvaiz  
Signature of Local Government Officer / Appointed Official

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Susan Narvaiz, this the 13<sup>th</sup> day of March, 20 09, to certify which, witness my hand and seal of office.

Shelley Goodwin Shelley Goodwin Notary Public  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath