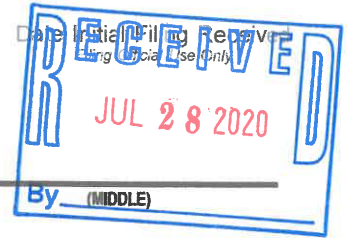


STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE  
A PUBLIC DOCUMENT



Please type or print in ink.

NAME OF FILER (LAST) (FIRST) By (MIDDLE)  
Goetz Thomas James

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Citrus Heights City Council

Division, Board, Department, District, if applicable

District 3

Your Position

Candidate

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

- State  Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- Multi-County \_\_\_\_\_  County of \_\_\_\_\_
- City of \_\_\_\_\_  Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2019, through December 31, 2019.  Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one circle.)
- or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2019.  The period covered is January 1, 2019, through the date of leaving office.
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_  -or- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- Candidate: Date of Election 11/03/2020 and office sought, if different than Part 1: City Councilmember

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 3

Schedules attached

- Schedule A-1 - Investments - schedule attached  Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule A-2 - Investments - schedule attached  Schedule D - Income - Gifts - schedule attached
- Schedule B - Real Property - schedule attached  Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-  None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
[Redacted] Citrus Heights CA 95621  
DAYTIME TELEPHONE NUMBER EMAIL ADDRESS  
[Redacted] [Redacted]

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed July 19th, 2020  
(month, day, year)

Signature [Redacted Signature]  
(File the originally signed paper statement with your filing official.)

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name  
Thomas Goetz

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Group One Consulting

ADDRESS (Business Address Acceptable)

13405 Folsom Blvd Suite 511, Folsom CA, 95630

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Technical Services

YOUR BUSINESS POSITION

Support Engineer II

GROSS INCOME RECEIVED  No Income - Business Position Only

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary  Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

Loan repayment

Commission or  Rental Income, list each source of \$10,000 or more

(Describe)

Other \_\_\_\_\_  
(Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Skatetown

ADDRESS (Business Address Acceptable)

1009 Orlando Ave, Roseville CA, 95661

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Entertainment

YOUR BUSINESS POSITION

Scorekeeper

GROSS INCOME RECEIVED  No Income - Business Position Only

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary  Spouse's or registered domestic partner's income  
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)

Sale of \_\_\_\_\_  
(Real property, car, boat, etc.)

Loan repayment

Commission or  Rental Income, list each source of \$10,000 or more

(Describe)

Other \_\_\_\_\_  
(Describe)

**2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

Loancare

ADDRESS (Business Address Acceptable)

3637 Sentara Way, Virginia Beach VA,

BUSINESS ACTIVITY, IF ANY, OF LENDER

Mortgage Lending

HIGHEST BALANCE DURING REPORTING PERIOD

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

OVER \$100,000

INTEREST RATE

3.75 %  None

TERM (Months/Years)

360

SECURITY FOR LOAN

None  Personal residence

Real Property \_\_\_\_\_  
Street address

City

Guarantor \_\_\_\_\_

Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

Name <b>Thomas Goetz</b>
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<b>1. INCOME RECEIVED</b>	
NAME OF SOURCE OF INCOME <b>Beacon Hill Staffing Group</b>	
ADDRESS (Business Address Acceptable) <b>600 Coolidge Dr #100, Folsom CA 95630</b>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE <b>Technical Services</b>	
YOUR BUSINESS POSITION <b>Support Engineer I</b>	
GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input checked="" type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
<input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	
<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	
<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)	
<input type="checkbox"/> Loan repayment	
<input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more	
_____ (Describe)	
<input type="checkbox"/> Other _____ (Describe)	

<b>1. INCOME RECEIVED</b>	
NAME OF SOURCE OF INCOME <b>Integral Networks Inc</b>	
ADDRESS (Business Address Acceptable) <b>4960 Rocklin Rd Ste. 100 Rocklin CA 95677</b>	
BUSINESS ACTIVITY, IF ANY, OF SOURCE <b>Technical Services</b>	
YOUR BUSINESS POSITION <b>Helpdesk Engineer</b>	
GROSS INCOME RECEIVED <input type="checkbox"/> No Income - Business Position Only	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input checked="" type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
<input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	
<input type="checkbox"/> Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	
<input type="checkbox"/> Sale of _____ (Real property, car, boat, etc.)	
<input type="checkbox"/> Loan repayment	
<input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more	
_____ (Describe)	
<input type="checkbox"/> Other _____ (Describe)	

<b>2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD</b>
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\* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* <b>American Honda Financial Services</b>
ADDRESS (Business Address Acceptable) <b>P.O. Box 70252, Philadelphia PA 19176</b>
BUSINESS ACTIVITY, IF ANY, OF LENDER <b>Vehicle Fianance</b>
HIGHEST BALANCE DURING REPORTING PERIOD
<input type="checkbox"/> \$500 - \$1,000
<input type="checkbox"/> \$1,001 - \$10,000
<input checked="" type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> OVER \$100,000

INTEREST RATE <b>6.9</b> % <input type="checkbox"/> None	TERM (Months/Years) <b>71 Months</b>
SECURITY FOR LOAN	
<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
<input type="checkbox"/> Real Property _____ Street address City	
<input type="checkbox"/> Guarantor _____	
<input checked="" type="checkbox"/> Other <b>2017 Civic</b> (Describe)	

Comments: \_\_\_\_\_