

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

08-JANUARY-2025

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Jose Gomez R.

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

City of Elk Grove

Division, Board, Department, District, if applicable

Public Works

Your Position

Senior Civil Engineer

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

Agency: Elk Grove

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 Elk Grove

Other _____

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

Annual: The period covered is January 1, 2024, through
December 31, 2024.

Leaving Office: Date Left ____/____/_____
(Check one circle below.)

-or-

The period covered is ____/____/_____, through
December 31, 2024.

The period covered is January 1, 2024, through the date of
leaving office.

-or-

Assuming Office: Date assumed ____/____/_____
and office sought, if different than Part 1: _____

The period covered is ____/____/_____, through
the date of leaving office.

Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (required)

► Total number of pages including this cover page: 2

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)
8401 Laguna Palms Way Elk Grove CA 95758

DAYTIME TELEPHONE NUMBER EMAIL ADDRESS
(916) 627-3646 jgomez@elkgrovecity.org

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 01/8/2025
(month, day, year)

Signature Jose R. Gomez
(File the originally signed paper statement with your filing official.)

Digitally signed by Jose R. Gomez
Date: 2025.01.08 09:30:10 -08'00'

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

▶ 1. INCOME RECEIVED **▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME
UC Davis Medical Center

ADDRESS *(Business Address Acceptable)*
4301 X Street, Sacramento, CA 95817

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION
Registered Nurse

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)

NAME OF SOURCE OF INCOME

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

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* INTEREST RATE TERM (Months/Years)

_____ _____% None _____

ADDRESS *(Business Address Acceptable)* SECURITY FOR LOAN

_____ None Personal residence

BUSINESS ACTIVITY, IF ANY, OF LENDER Real Property _____
Street address

_____ _____ _____
City

HIGHEST BALANCE DURING REPORTING PERIOD Guarantor _____

\$500 - \$1,000 _____
 \$1,001 - \$10,000 (Describe)

\$10,001 - \$100,000 _____

OVER \$100,000 _____

Comments: _____