

NEVADA FINANCIAL DISCLOSURE STATEMENT
(Attach additional sheets if necessary.)

RECEIVED
DEC 28 2005
COMMISSION ON ETHICS

NAME BRAD T GOETSCH
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CITY, STATE, ZIP FALLOON NV 89406
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LENGTH OF RESIDENCE IN NEVADA 8.5 YEARS
LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE 8.5 YEARS
NRS 281.571(1)(a)

List all public offices for which this financial disclosure statement is required [NRS 281.571, Subsection 1(g)]:

| Public Office | Annual Compensation | Term or Date Appointed | ANNUAL | CANDIDATE | APPOINTMENT |
|---|---------------------|------------------------|---|---|---|
| | | | all elected and appointed public officers (no later than Jan. 15 each year) | (no later than the 10 th day after the last day to qualify as a candidate) | to fill unexpired term of an elected or appointed public officer (within 30 days) |
| | | | NRS 281.559(1)(b) 281.561(1)(b) | NRS 281.561(1)(a) | NRS 281.559(1)(a) |
| <u>CHURCHILL COUNTY MANAGER</u> | <u>\$ 106,000</u> | <u>MAY 04</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <u>BOARD FOR FINANCING WATER PROJECTS</u> | <u>\$ 0</u> | <u>NOV 05</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | \$ | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

List all general sources of income for you and members of your household over 18 years of age [NRS 281.571, Subsection 1(b)]:

| | Self | Household Member |
|---|-------------------------------------|-------------------------------------|
| <u>CHURCHILL COUNTY</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <u>NAVY RETIREMENT & VA</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <u>NAVY MARINE CORPS RELIEF SOCIETY (WIFE-LOCAL DIRECTOR)</u> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <u>MUTUAL FUNDS + INVESTMENT ACCTS (FIDELITY, HARTFORD, AIA, GOLD CAP, WELLS FARGO)</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <u>EG+G CONSULTING (DEFENSE DEPT. RELATED)</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

List each creditor to whom you or a member of your household owes \$5,000 or more [except (1) debt secured by mortgage or deed of trust on real property which is not required to be listed below, and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281.571, Subsection 1(d)]:

| | Self | Household Member |
|--|-------------------------------------|--------------------------|
| <u>USAA COLLEGE/HOME ADDITION LOAN</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> |