

filed for Commissioner
497

FILE

JUN 24 2004

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

DEAN HELLER
SECRETARY OF STATE

NAME Ron Schrempf LENGTH OF RESIDENCE IN NEVADA 25 yrs
 MAILING ADDRESS 6310 Jackson Rd LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO
 CITY, STATE, ZIP Winnemucca, NV 89445 VOTE 25 yrs
 TELEPHONE 775-623-5053 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 all elected and appointed public officers (no later than Jan. 15 each year) NRS 281.559(1)(b) 281.561(1)(b)	CANDIDATE (no later than the 10 th day after the last day to qualify as a candidate) NRS 281.561(1)(a)	APPOINTMENT to fill unexpired term of an elected or appointed public officer (within 30 days) NRS 281.559(1)(a)
<u>Hu Co. Hospital Board</u>	<u>\$ 1100</u>	<u>Jan 2002</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Hu Co. Commission</u>	<u>\$?</u>	<u>NOT yet</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<u>\$</u>	<u>(4 yrs)</u>	<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>Rons Seed & Supply</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Rons Seeds Supply</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Hu Co. Hospital Board</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>Hu Co School Dist.</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input 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>Wells Fargo - Home Equity</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Boj A - Cash Operating</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>Boj A - Home Equity</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281.571, Subsection 1(f)]:

	Self	Household Member
<u>Home Seed & Supply</u>	<input checked="" type="checkbox"/>	<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"/>

List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281.571, Subsection 1(c)]:

Specific Location	Particular Use
<u>See attached list</u>	<u>Vacant Rentals</u>
_____	<u>Vacant land</u>
_____	_____

List the identity of donor and value of each gift received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [except (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281.571, Subsection 1(e)]:

Donor	Value of Gift
<u>None</u>	<u>0</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: 6-20-04 Signature: [Signature]

Disclose the specific location and particular use of any real estate, **other than your primary personal residence**, in which you or a member of your household has a legal or beneficial interest and whose fair market value is \$2,500 or more and which is located in this state or an adjacent state.

SPECIFIC LOCATION

(Specific addresses are required. Give street address or legal description)

NATURE OF ITS PARTICULAR USE(S)

(Unimproved vacant land, agricultural land, commercial building, apartments, rental, etc.)

90 S Winnemucca, NV		unimproved - vacant
710 Grass Valley Road	Winnemucca, NV	Ron's Seed & Supply Comm. Bus.
6135 Allen Road	Winnemucca, NV	single family rental - vacant
6305 Jackson Road	Winnemucca, NV	single family rental - vacant
6450 Jackson Road	Winnemucca, NV	unimproved - vacant
4010 Grass Valley Road	Winnemucca, NV	sold - no longer own
6115 Venus	Winnemucca, NV	sold - no longer own

(Attach additional sheets if necessary)

12. Disclose the name of each creditor to whom you or a member of your household owes \$5,000 or more, except for: (a) A debt secured by a mortgage or deed of trust on real estate which is not required to be listed under item 11 above; (b) A debt for which a security interest in a motor vehicle