

FILED

JAN 09 2008

SECRETARY OF STATE  
ELECTIONS DIVISION

NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

(Please read the instructions before completing.)

17425

PERSONAL INFORMATION:

NAME: Tom Grady	LENGTH OF RESIDENCE IN NEVADA: 68 yrs
ADDRESS: 43 Fairway Dr	
CITY, STATE, ZIP: Yerington Nev. 89447	LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (NRS 281A.620(1)(a)): 7 yrs
TELEPHONE: 775-463-2612	E-MAIL: grady.TNP@qcc-net

SECTION A (Public Office): List all public offices for which this financial disclosure statement is required [NRS 281A.620.1(g)] and check each box accordingly i.e. annual, candidate or appointment filing:

- ANNUAL all elected and appointed public officers (no later than Jan. 15 each year)
- CANDIDATE (no later than the 10<sup>th</sup> day after the last day to qualify as a candidate)
- APPOINTMENT to fill unexpired term of an elected or appointed public officer (within 30 days)

Public Office	Elected or Appointed (E or A)	Annual Compensation	Term or Date Appointed	ANNUAL	CANDIDATE	APPOINTMENT
				NRS 281A.600.1(b) 281A.610.1(b)	NRS 281A.610.1(a)	NRS 281A.600.1(a)
State Assembly Dist 38	E	\$ 7,800 <sup>00</sup>	Nov 2008	<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"/>

SECTION B (Sources of Income): List each source of your income (including any source listed in Section A), or that of any member of your household who is 18 years of age or older. [NRS 281A.620.1(b)]:

	Self	Household Member
State Assembly	<input checked="" type="checkbox"/>	<input type="checkbox"/>
State Retirement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Social Security	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Stocks & Bonds	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

SECTION C (Real Property): 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 281A.620.1(c)]:

Specific Location	Particular Use
N/A	

**SECTION D (Creditors):** 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 in Section C above; and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281A.620.1(d)]:

	Self	Household Member
N/A	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION E (Gifts):** List the identity of donor and value of each gift of all gifts 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 281A.620.1(e)]:

Donor	Gift	Value of Gift
N/A		\$
		\$
		\$
		\$
		\$

**SECTION F (Business Entities):** 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 281A.620.1(f)]:

	Self	Household Member
N/A	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

**THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.**

Date: 1-2-08

Signature: 

**FILE COMPLETED FORM WITH:**

Appointed Public Officers  
 Nevada Commission on Ethics  
 3476 Executive Pointe Way, Suite 10  
 Carson City, Nevada 89706  
 775.687.5469 • 775.687.1279 fax

Elected Public Officers and Candidates for Public Office  
 Nevada Secretary of State, Elections Division  
 101 North Carson Street, Suite 3  
 Carson City, Nevada 89701  
 775.684.5705 • 775.684.5718 fax

**ROSS MILLER**  
**SECRETARY OF STATE**  
State of Nevada  
2008  
**CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT**

**Candidate**  
**Acknowledgement**

I, Tom Grady, hereby acknowledge receipt of the required forms and filing date schedule for the reporting of contributions and expenses pursuant to the Nevada Campaign Practices Act.

I understand that:

- I must file the prescribed reports by:  
Report No. 1 – **August 5, 2008**  
Report No. 2 – **October 28, 2008**  
Report No. 3 – **January 15, 2009**
  
- A violation of the reporting of contributions and expenses is subject to a civil penalty of up to \$5,000 for each violation and payment of court costs and attorney's fees;
  
- I must file the required Contributions & Expenses Reports even though:
  - (1) I withdraw my candidacy;
  - (2) I have no opposition;
- (3) I lose the primary;
- (4) My name does not appear on either the primary or general election ballot;
  - (5) I am elected to office;
  - (6) I do not file a declaration of candidacy, but am a candidate as defined in NRS 294A.005 because I have received campaign contributions in excess of \$100; or
  - (7) I do not receive contributions and/or expend any funds (less the filing fee).
  
- **I UNDERSTAND THAT A MONETARY CIVIL PENALTY MAY BE ASSESSED TO ME FOR FAILURE TO TIMELY FILE THESE REPORTS. (NRS 294A.420)**
  
- **I UNDERSTAND THAT EACH REPORT MUST BE SIGNED UNDER PENALTY OF PERJURY. (NRS 294A.120, 294A.200)**

Tom Grady  
Signature

**Received and Filed:**

This \_\_\_\_\_ day of \_\_\_\_\_, 2008

\_\_\_\_\_  
Filing Officer

**FILING OFFICER:** This form is to be signed, detached and a copy is to be given to the candidate.