

**NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)**

(Please read the instructions before completing.)

**PERSONAL INFORMATION:**

18479

|  |   |
|--|---|
| NAME: Cheryl Lau                       | LENGTH OF RESIDENCE IN NEVADA: 22 years   |
| ADDRESS: 3819 Paradise Vw              |   |
| CITY, STATE, ZIP: Carson City NV 89703 | LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (NRS 281A.620(1)(a)): 22 years |
| TELEPHONE: 775-8832988                 | E-MAIL: gfdull@att.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)<br>281A.610.1(b) | NRS 281A.610.1(a)                   | NRS 281A.600.1(a)        |
| Assembly Dist. 40 | E                             | \$ 8274. <sup>00</sup> |                        | <input 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"/> |

**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                    |
|-----------------------|-------------------------------------|-------------------------------------|
| NV Pub. Emp. Ret. Sys | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| SSA-US Treasury       | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Transportation Inc    | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Smith Barney          | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Wachovia              | <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 |
|-------------------------------|----------------|
| 2116 Junata, Sacramento CA    | rental         |
| 3917 La Verne, Sacramento CA  | rental         |
| 909 Hampton, Sacramento CA    | rental         |
| 3711 Tenace, So Lake Tahoe CA | rental         |

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**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         |
|---------------------------|-------------------------------------|--------------------------|
| Wells Fargo Home Mortgage | <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"/> |

**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 |
|----------|----------|---------------|
| <u>Ø</u> | <u>Ø</u> | \$ <u>Ø</u>   |
|          |          | \$            |
|          |          | \$            |
|          |          | \$            |
|          |          | \$            |

**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                    |
|----------------------|-------------------------------------|-------------------------------------|
| Transportation, Inc. | <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"/>            |

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

Date: 5/23/08

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