

JAN 23 2008

SECRETARY OF STATE
ELECTIONS DIVISION

NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

(Please read the instructions before completing.)

18078

PERSONAL INFORMATION:

NAME: <u>TEOD PLUMMER</u>	LENGTH OF RESIDENCE IN NEVADA: <u>27 YEARS</u>
ADDRESS: <u>P.O. Box 59</u>	
CITY, STATE, ZIP: <u>LAKESHORE, NV 89419</u>	LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (NRS 281A.620(1)(a)): <u>16 YEARS</u>
TELEPHONE: <u>775-273-2631</u>	E-MAIL: <u>teod@gbis.com</u>

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 10th 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, Appointed or Appointed to Elective (E, A or A/E)	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)
<u>PERMITS COUNTY SCHOOL</u>	<u>E</u>	<u>\$ 2,400</u>	<u>4</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"/>

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
<u>DELAWARE, PLUMMER</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>PCSD TEACHER (WIFE)</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>ARMY NATIONAL GUARD</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input 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
<u>1070 Canal Ave</u>	<u>Commercial</u>
<u>1135 Central Ave</u>	<u>ci</u>
<u>48 S Canal Ave</u>	<u>ci</u>
<u>675/945/995 W. Boulevard</u>	<u>ci</u>
<u>260/250 Main Street</u>	<u>ci</u>
<u>600 N Street</u>	<u>ci</u>

Print Name of Public Officer

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
USAA Credit Card	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
MBNA Credit	<input checked="" type="checkbox"/>	<input checked="" 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
<i>[Signature]</i>		\$
		\$
		\$
		\$

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
BELMONT; PLINTON	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
PLINTON PROPERTIES	<input checked="" 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: *[Signature]*

Signature: *[Signature]*

Print name: *[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