



# NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

DEC 22 2010

Please read the instruction before completing. Attach additional sheets if necessary.

COMMISSION ON ETHICS

### PERSONAL INFORMATION:

NAME: <i>Tammy Grace</i>	LENGTH OF RESIDENCE IN NEVADA: <i>44 yrs</i>
ADDRESS: <i>401 S. Carson St.</i>	
CITY, STATE, ZIP: <i>Carson City, NV 89701</i>	LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE: <i>44 yrs</i>
TELEPHONE: <i>775-684-6800</i>	E-MAIL: <i>tgrace@lcb.state.nv.us</i>

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

Title of Public Office and Name of Government	Elected, appointed or appointed to elected (E, A, AE)	Annual Compensation	Date elected or appointed	Check the appropriate boxes below		
				ANNUAL NRS 281A.600.1 & 281A.610.1	CANDIDATE NRS 281A.610.1(a)	APPOINTMENT NRS 281A.600.1
<i>Deputy Director, Legislative Counsel Bur.</i>	<i>A</i>	<i>\$ 100,851.90</i>	<i>9/23/10</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SECTION B** (Sources of Income): List each source of your income (in addition to 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).

	Household	
	Self	Member
<i>Frank's Automotive and Diesel</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>Fallon Theatres</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<i>Motor Sports Safety, Inc.</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<i>Interest Income</i>	<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
<i>3820 Bluebird Cr. Reno, NV 89509</i>	<i>child's home</i>

Name of Public Officer: Tammy Grace

**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 your personal residence; and (2) debt on a motor vehicle for personal use retained by seller. NRS 281A.620.1(d).

	Household	
	Self	Member
	Check the appropriate boxes	
Bank of America	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Churchill County Federal Credit Union	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**SECTION E** (Gifts): List the gift, identity of donor and value of each gift if all gifts received are 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).

Gift	Donor	Value of Gift
None		\$
		\$
		\$
		\$

**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).

	Household	
	Self	Member
	Check the appropriate boxes	
None		

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: 12/22/10

Signature: Tammy Grace

Print Name: TAMMY GRACE

**WHERE TO FILE:**

**APPOINTED PUBLIC OFFICERS  
SUBMIT TO:**  
Nevada Commission on Ethics  
704 W. Nye Lane, Suite 204  
Carson City, Nevada 89703  
775.687.5469 • 775.687.1279 fax

**ELECTED PUBLIC OFFICERS OR CANDIDATES  
SUBMIT TO:**  
Nevada Secretary of State, Elections Division  
101 North Carson Street, Suite 3  
Carson City, Nevada 89701  
775.684.5705 • 775.684.5718 fax