



Declaration of Candidacy of

HOWARD FLEBBE

For the Office of

CITY COUNCIL
Seat

2
Ward

STATE OF NEVADA

COUNTY OF CLARK

For the purpose of having my name placed on the official ballot as a candidate for the office of

CITY COUNCIL

I, the undersigned HOWARD FLEBBE, do swear or affirm under penalty of perjury that I actually, as opposed to constructively, reside at 2103 LAKE MARTIN CT. in the City of North Las Vegas, County of Clark, State of Nevada; that my actual, as opposed to constructive, residence in the city to which the office pertains began on a date at least 30 days immediately preceding the date of the close of filing of declarations of candidacy for this office; that my telephone number is 631-5275, and the address at which I receive mail, if different than my residence, is SAME; that if nominated as a nonpartisan candidate at the ensuing election, I will accept the nomination and not withdraw; that I will not knowingly violate any election law or any law defining and prohibiting corrupt and fraudulent practices in campaigns and elections in this state; that I will qualify for the office if elected thereto, including, but not limited to, complying with any limitation prescribed by the constitution and laws of this state concerning the number of years or terms for which a person may hold the office; and my name will appear on all ballots as designated in this declaration.

HOWARD FLEBBE

Designation of name on ballot

[Signature]

Signature of candidate for office

Subscribed and sworn to before me this 3rd day of the month of Feb of the year 2003.

[Signature]

Notary Public or other person authorized to administer an oath

CITY OF NORTH LAS VEGAS
2003 PRIMARY AND GENERAL MUNICIPAL ELECTIONS



CITY OF
NORTH LAS VEGAS

CANDIDATE FACT SHEET

NAME TO BE PRINTED ON BALLOT: HOWARD FLEBBE

HOME ADDRESS: 2632 LAKE MARTIN, 89031

LENGTH OF RESIDENCY: 6 YRS CONTACT TELEPHONE NUMBER: _____

OCCUPATION: RETIRED PLACE OF EMPLOYMENT: _____

PARTY AFFILIATION (Optional): _____

PROFESSIONAL ORGANIZATIONS: _____

PERSONAL INFORMATION (Education, hobbies, interests): _____

SPOUSE'S NAME: _____ NUMBER OF CHILDREN: 0

OTHER INFORMATION OF INTEREST TO VOTERS: _____

CAMPAIGN MANAGER/CONTACT PERSON: HOWARD FLEBBE TELEPHONE NO: 631-5275

ADDRESS: _____

POLITICAL SIGN FEE :

17.24.115 City of North Las Vegas Municipal Code: Portable political signs are permitted in any land use district, subject to the provisions and limitations contained in this chapter provided a fee of twenty-five dollars (\$25.00) per candidate, issue or ballot question is first remitted to the City of North Las Vegas City Clerk's Office, regardless of the number of signs placed. The purpose of the fee is to provide the City with the name and pertinent information about the campaign manager or party responsible for repair of damaged or hazardous signs, and to monitor and remove all unclaimed signs following the election. Signs placed within the North Las Vegas city limits without first submitting the proper fee shall be removed and impounded until the said fee is paid in full.



2003 Municipal Election

City of North Las Vegas

CODE OF FAIR CAMPAIGN PRACTICES


There are basic principles of decency, honesty and fair play which every candidate for public office in the State of Nevada has a moral obligation to observe and uphold, in order that, after vigorously contested but fairly conducted campaigns, the voters may exercise their constitutional right to vote for the candidate of their choice and that the will of the people may be fully and clearly expressed on the issues.

THEREFORE:

- 1. I will conduct my campaign openly and publicly and limit attacks against my opponent to legitimate challenges to his voting record or qualifications for office.***
- 2. I will not use character defamation or other false attacks on a candidate's personal or family life.***
- 3. I will not use campaign material which misrepresents, distorts or otherwise falsifies the facts, nor will I use malicious or unfounded accusations which are intended to create or exploit doubts, without justifications, about the personal integrity of my opposition.***
- 4. I will not condone any dishonest or unethical practice which undermines the American system of free elections or impedes or prevents the full and free expression of the will of the voters.***

I, the undersigned, as a candidate for election to public office in the State of Nevada, hereby voluntarily pledge myself to conduct my campaign in accordance with the principles and practices set forth in this code.

2/5/03
Date


Signature of Candidate

NOTE: ***Subscription to the code is voluntary. A candidate who subscribes to the code may indicate on his campaign materials that he subscribes to the code.***

City of North Las Vegas
2003
PRIMARY AND GENERAL ELECTIONS
MUNICIPAL OFFICE
CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT
Candidate
Acknowledgement

I, HOWARD FLEBBE, 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:

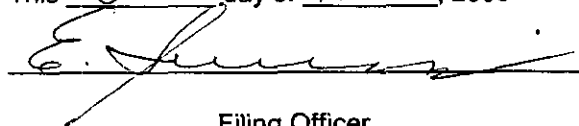
- I must file the prescribed reports by:
Report No. 1 – **April 1, 2003**
Report No. 2 – **May 27, 2003**
Report No. 3 – **August 18, 2003**
- A violation of the reporting of contributions and expenses is subject to a civil penalty of up to \$5,000 for each violation and payment of court costs and attorney's 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; or
 - (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.
- **I UNDERSTAND THAT A MONETARY CIVIL PENALTY MAY BE ASSESSED AGAINST ME FOR FAILURE TO TIMELY FILE THESE REPORTS. (NRS 294A.420)**



Signature

Received and Filed:

This 5th day of Feb, 2003




Filing Officer

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

DISPOSITION OF UNSPENT CONTRIBUTIONS REPORT
Acknowledgement

I, HOWARD FLEISBERG, hereby acknowledge receipt of the required forms and filing date schedule for the reporting of unspent contributions as a candidate and/or as an elected public official pursuant to the Nevada Campaign Practices Act. I understand that:

- I must file the prescribed forms by the specified statutory date if I have unspent contributions;
- A violation of the reporting of unspent contributions is subject to a civil penalty of up to \$5,000 for each violation and payment of court costs and attorney's fees;
- If I am a *candidate* for public office and have contributions that remain unspent from the previous election cycle, I **must** file the required Disposition of Unspent Contributions Report 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) My name is removed from the ballot by court order or a judge determines I am ineligible to run for office after I have filed my declaration of candidacy for office.
- If I am an *elected public officer* and have contributions that remain unspent from the previous election cycle, I **must** file the required Disposition of Unspent Contributions Report **every** January 15 during my term of office. I **must** also file (if contributions remain) within two months after I no longer hold office due to resignation, removal from office or expiration of term.
- **I UNDERSTAND THAT A MONETARY CIVIL PENALTY MAY BE ASSESSED TO ME FOR FAILURE TO TIMELY FILE THIS REPORT. (NRS 294A.420)**



Signature

Received and Filed:

This 5th day of Feb, 2003

Filing Officer

FILING OFFICER: This form is to be signed, detached and a copy is to be given to the candidate/elected public officer.

**STATE OF NEVADA
COMMISSION ON ETHICS**

3476 Executive Pointe Way, Suite 16
Carson City, Nevada 89706-7946
(775) 687-5469 • FAX (775) 687-1279

Acknowledgment

(Required by NRS 281.552)

I hereby acknowledge that I have read and understand the statutory ethical standards for public officers and public employees provided in NRS Chapter 281. I acknowledge that I have (check all that apply):

reviewed the provisions of NRS Chapter 281 on-line from the Commission's website
<http://ethics.state.nv.us>


reviewed the provisions of NRS Chapter 281 by requesting a copy thereof from the Commission office.

I understand that this form must accompany the first Statement of Financial Disclosure that I am required to file with the Nevada Commission on Ethics pursuant to NRS 281.561 and that refusal to execute and file this acknowledgment with the Nevada Commission on Ethics constitutes nonfeasance in office and is a ground for removal pursuant to NRS 283.440.

2/5/03
Date

702 631 5275
Telephone Number

Fax Number


Signature

HOWARD FLEBBE
Printed Name

2632 LAKE MARTIN N.L.V. 89031
Mailing Address

Office or Position

Please return completed form to:

Nevada Commission on Ethics
3476 Executive Pointe Way, Suite 16
Carson City, Nevada 89706-7946

**Nevada Commission on Ethics
FINANCIAL DISCLOSURE STATEMENT**
(attach additional sheets if necessary)

name HOWARD FLEBBE telephone 702 631 5275
 address 21632 LAKE MARTIN city, state, zip N. LAS VEGAS NV. 89031
 length of residence in Nevada 6 YRS district where registered to vote _____ [NRS 281.571, Subsection 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 (3/31)	candidate	NEW	leaving
			NRS 281.581(1)(b)	NRS 281.581(1)(c)	appointment NRS 281.581(1)(d)	office NRS 281.581(1)(e)
			<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 all general sources of income for you and members of your household over 18 [NRS 281.571, Subsection 1(b)]:

source of income	self	household member
<u>2 TEAMSTER PENSIONS</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>S.S.</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>S.S.</u>	<input type="checkbox"/>	<input checked="" 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)]:

creditor	self	household member
<u>VISA / BANK ONE</u>	<input type="checkbox"/>	<input 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)]:

business entity	self	household member
<u>NONE</u>	<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>NONE</u>	

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, judicial or political action] [NRS 281.571, Subsection 1(e)]:

donor	value of gift
<u>NONE</u>	

I AFFIRM THAT ALL INFORMATION HEREIN IS ACCURATE AND COMPLETE.
 Date: 7/5/03 Signature: Howards Flebbe