



AMENDED
JUDICIAL FINANCIAL DISCLOSURE STATEMENT FOR YEAR ENDING
DECEMBER 31, 20 **18**

GENERAL INFORMATION

1. Name JERRY A. WIESE II
2. Title DISTRICT COURT JUDGE
3. Mailing address 200 LEWIS AVE, DEPT 30, LAS VEGAS, NV. 89155
4. Length of residence in Nevada 49
5. County in which you are registered to vote CLARK
6. Length of residence in the county in which you are registered to vote 49

COMPENSATION FOR EXTRA-JUDICIAL ACTIVITIES

7. Judges, and not their spouses or domestic partners, must disclose the date, place, and nature of any extra-judicial activity for which you received compensation, the name of the payor, and the amount or value of the compensation so received. *See Code of Judicial Conduct Rule 3.15 (A)(1).* NRS 281A.070 defines compensation to mean, "any money, thing of value or economic benefit conferred on or received by any person in return for services rendered, personally or by another." Attach additional sheets if necessary.

<i>Date</i>	<i>Nature and Place of Activity</i>	<i>Name of Payor</i>	<i>Amount</i>

GIFTS, BEQUESTS, FAVORS, OR LOANS

8. Judges, and not their spouses or domestic partners, must disclose the date, place, name of the donor, amount, and nature of any gift, bequest, favor or loan to you if its value exceeded \$200. *See Code of Judicial Conduct Rule 3.15(A)(2)*. In completing this section, please review all provisions of Code of Judicial Conduct Rule 3.13. Attach additional sheets if necessary.

<i>Date</i>	<i>Name and Place of Gift</i>	<i>Name of Donor</i>	<i>Amount</i>
SEPT. 2018	NASCAR TICKET	LV MOTOR SPEEDWAY	ESTIMATE \$300

9. Disclose the date, reimbursement of expenses or waiver of fees or charges on your behalf or on behalf of your spouse, domestic partner, or guest if its value exceeded \$200. *See Code of Judicial Conduct Rule 3.15(A)(2)*. In completing this section, please review all provisions of Code of Judicial Conduct Rule 3.14. Attach additional sheets if necessary.

<i>Date</i>	<i>Fees or Charges Waived or Expenses Reimbursed</i>	<i>Source or Reimbursement or Waiver</i>	<i>Amount</i>

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND COMPLETE.

<u>6/12/2025</u> Date	 Signature
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File this form with the State Court Administrator.

Deliver or mail to:

**State Court Administrator
Attn: Cynthia Sampson
Administrative Office of the Courts
201 S. Carson Street, Suite 250
Carson City, Nevada 89701-4702
Telephone: (775) 684-1744**