

REC NO. 0130 EP 1  
JAN 14 2005  
COMMISSION ON ETHICS

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

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name MELVIN F. EARLS address 8600 ROBURI'S TR. STAGECOACH NV. 89429  
length of residence in Nevada 14 YEARS district where registered to vote STAGECOACH [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	term or date appointed	annual (3/31) NRS 281.571(1)(a)	candidate NRS 281.571(1)(b)	appointed NRS 281.571(1)(c)	leaving office NRS 281.571(1)(d)
<u>JUSTICE STAGECOACH GLD</u>	<u>4 YEAR TERM</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"/>	<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)]:  
SOCIAL SECURITY  
SSI  
LOUIS HED MARTIN PENSION

self	household member
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>
<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)]:

	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 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)]:

	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>	<u>N/A</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>	<u>N/A</u>

I AFFIRM THAT ALL INFORMATION HEREIN IS ACCURATE AND COMPLETE.

Date: 1/7/05

Signature: [Handwritten Signature]