

FILE

JUL 14 2006

DEAN HELLER
SECRETARY OF STATE

1650

NEVADA FINANCIAL DISCLOSURE STATEMENT

(Attach additional sheets if necessary.)

NAME Merle Ann Berman
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CITY, STATE, ZIP Las Vegas, NV 89119
TELEPHONE 702-228-0022

LENGTH OF RESIDENCE IN NEVADA 32 Years
LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE [per NRS 281.571(1)(a)] 11-12 Years
E-MAIL merleberman_publicadmin@cox.net

List all public offices for which this financial disclosure statement is required [NRS 281.571, Subsection 1(g)]:

Public Office	Elected (E) or Appointed (A)	Annual Compensation	Term or Date Appointed	ANNUAL all elected and appointed public officers (no later than Jan 15 each year) NRS 281.571(1)(b) <input type="checkbox"/>	CANDIDATE (no later than the 10 th day after the last day to qualify as a candidate) NRS 281.561(1)(a) <input checked="" type="checkbox"/>	APPOINTMENT to fill unexpired term of an elected or appointed public officer (within 30 days) NRS 281.569(1)(a) <input type="checkbox"/>
Candidate - Clark County Public Administrator	E	\$ 72000.00	January 2007	<input type="checkbox"/>	<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"/>

List all general sources of income for you and members of your household over 18 years of age [NRS 281.571, Subsection 1(b)]:

Source of Income	Self <input type="checkbox"/>	Household Member <input type="checkbox"/>
Interest	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Board Member - NASDAQ	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Trust/Deed	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input 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 <input type="checkbox"/>	Household Member <input type="checkbox"/>
n/a	<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
_____	<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 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)].

Parcel #	Specific Location	Dirt lot	Particular Use
14006110018	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List the identity of donor and value of each gift 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 281.571, Subsection 1(o)]:

Donor	Value of Gift
n/a	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: July 14, 2006

Signature: _____

