

FILE

NEVADA FINANCIAL DISCLOSURE STATEMENT

(Attach additional sheets if necessary.)

DEC 29 2006

certified DEAN HELLER SECRETARY OF STATE

14654

NAME William J Hammargren
MAILING ADDRESS 232 West 6th St
CITY, STATE, ZIP Winnemucca, NV 89445
TELEPHONE 775-623-9366

LENGTH OF RESIDENCE IN NEVADA 9 yrs 6 months
LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO
VOTE [per NRS 281.571(1)(a)] 9 yrs 6 months
E-MAIL billmegs@sbcglobal.net

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

Table with columns: Public Office, Elected (E) or Appointed (A), Annual Compensation, Term or Date Appointed, ANNUAL all elected and appointed public officers, CANDIDATE (no later than the 10th day after the last day to qualify as a candidate), APPOINTMENT to fill unexpired term of an elected or appointed public officer (within 30 days).

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

Table with columns: Source of Income, Self, Household Member. Includes entries like State of Nevada Employee and Safe Haven Childcare Center.

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)]:

Table with columns: Creditor Name, Self, Household Member. Includes entries like Citibank, Pen Fed, American Express, and US Bank.

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
Safe Haven Childcare Center	<input checked="" 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"/>	<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
312 W 6th St Winnemucca, NV	20% owner in home my grandmother lives
_____	_____
_____	_____
_____	_____

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(e)]:

Donor	Value of Gift
none	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: December 29, 2006 Signature: 