

FILED

NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS) JAN 07 2009

(Please read the instructions before completing.)

20177

SECRETARY OF STATE ELECTIONS DIVISION

PERSONAL INFORMATION:

NAME: MICHAEL A. HALEY LENGTH OF RESIDENCE IN NEVADA: 28 YEARS
ADDRESS: 3375 SIERRA CREST WAY
CITY, STATE, ZIP: RENO, NV 89509 LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (NRS 281A.620.1)(a): 28 YEARS
TELEPHONE: 775-787-3510 E-MAIL: MHALEY147@CHARTER.NET

SECTION A (Public Office): List all public offices for which this financial disclosure statement is required [NRS 281A.620.1(g)] and check each box accordingly i.e. annual, candidate or appointment filing:

- ANNUAL all elected and appointed public officers (no later than Jan. 15 each year)
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)

Table with columns: Public Office, Elected, Appointed or Appointed to Elective (E, A or A/E), Annual Compensation, Term or Date Appointed, ANNUAL NRS 281A.600.1(b) 281A.610.1(b), CANDIDATE NRS 281A.610.1(a), APPOINTMENT NRS 281A.600.1(a). Row: SHERIFF, WASHOE COUNTY, E, \$ 144,699.00, 01/01/07, [checked], [], []

SECTION B (Sources of Income): List each source of your income (including any source listed in Section A), or that of any member of your household who is 18 years of age or older. [NRS 281A.620.1(b)]:

Table with columns: Source of Income, Self, Household Member. Rows: PERS RETIREMENT, INVESTMENTS IN 401K, VETERANS ADMINISTRATION, INVESTMENTS IN 401K

SECTION C (Real Property): 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 281A.620.1(c)]:

Table with columns: Specific Location, Particular Use. Rows: 3973 KENTWOOD COURT, RENO, NV (PART OWNERSHIP WITH SON (STEVE), SONS PERSONAL RESIDENCE); 1600 CROWN, RENO, NV (PART OWNERSHIP WITH SON (BRAIN), SONS PERSONAL RESIDENCE)

MICHAEL A. HALEY

Print Name of Public Officer

SECTION D (Creditors): 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 in Section C above; and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281A.620.1(d)]:

	Self	Household Member
NONE	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

SECTION E (Gifts): 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, or political action] [NRS 281A.620.1(e)]:

<u>Donor</u>	<u>Gift</u>	<u>Value of Gift</u>
NONE		\$
_____	_____	\$
_____	_____	\$
_____	_____	\$

SECTION F (Business Entities): 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 281A.620.1(f)]:

	Self	Household Member
NONE	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: January 5, 2009

Signature: 
Print name: MICHAEL A. HALEY

FILE COMPLETED FORM WITH:
Appointed Public Officers
Nevada Commission on Ethics
3476 Executive Pointe Way, Suite 10
Carson City, Nevada 89706
775.687.5469 • 775.687.1279 fax

Elected Public Officers and Candidates for Public Office
Nevada Secretary of State, Elections Division
101 North Carson Street, Suite 3
Carson City, Nevada 89701
775.684.5705 • 775.684.5718 fax