

# NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

RECEIVED

Please read the instructions before completing. Attach additional sheets if necessary.

MAR 31 2011

**PERSONAL INFORMATION:**

<b>NAME:</b> <small>(First, Middle, Last)</small>	Dennis Paul Magers	<b>LENGTH OF RESIDENCE IN NEVADA (Years)</b>	<b>COMMISSION ON ETHICS</b> 33
<b>ADDRESS:</b> <small>(Number, Street Name)</small>	PO BOX 615		
<b>CITY, STATE, ZIP CODE:</b>	Sparks, NV 89432-0615	<b>LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (Years)</b>	1
<b>TELEPHONE:</b>	775-742-0723	<b>E-MAIL:</b>	dennismagers@gmail.com Trustee,

**SECTION A (Information about your public office):**

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

- **ANNUAL FILING:** elected and appointed public officers (if required) no later than Jan. 15 each year
- **CANDIDATE FOR OFFICE FILING:** filed by candidates for public office no later than the 10 days after the last day to qualify as a candidate
- **NEW APPOINTMENT FILING:** filed when appointed to fill unexpired term of an elected or appointed public officer (within 30 days of the appointment)

TITLE OF PUBLIC OFFICE AND NAME OF GOVERNMENT <small>(Title of the position you hold/seek, and name of the entity that employs this position e.g. "City Manager, City of XYZ")</small>	Elected, appointed or appointed to elective office <small>(Select A, E or AE)</small>	Is this position entitled to annual compensation of \$ 6000 or more? <small>(Select Yes or No)</small>	Amount of annual compensation received	Date elected or appointed	Type of filing <small>(The reason for completing this form)</small>		
					Annual filing	Candidate for office	New appointment
Trustee, Palomino Valley GID	A	NO	\$	03/10/2011			<input checked="" type="checkbox"/>
	-	-	\$				
	-	-	\$				

**SECTION B (Sources of income):**

List each source of your income (in addition to 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):

SOURCES OF INCOME:	Self	Household Member
	<small>Check the appropriate box</small>	
Retirement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

**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) which is located in this state or an adjacent state [NRS 281A.620.1(c)]:

SPECIFIC LOCATION <small>(Address, City, State)</small>	PARTICULAR USE <small>(Rental property etc.)</small>
NONE	

**NAME OF PUBLIC OFFICER** (First, Middle, Last): **Dennis Paul Magers**

**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)]:

NAME OF THE CREDITOR	Self	Household Member
	Check the appropriate box	
NONE		

**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)]:

DONOR (Name of the person/entity giving the gift)	GIFT (Description e.g. book, watch etc.)	VALUE
NONE		\$
		\$
		\$
		\$
		\$

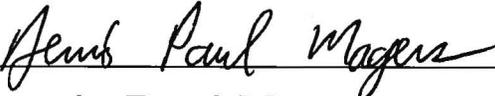
**SECTION F** (Business entities):

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)]:

BUSINESS ENTITY	Self	Household Member
	Check the appropriate box	
NONE		

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE

Date: **29 MAR 2011**

Signature: 

Print name: **Dennis Paul Magers**

FILE COMPLETED FORM WITH:

Appointed Public Officers  
Nevada Commission on Ethics  
704 W. Nye Lane, Suite 204  
Carson City, Nevada 89703  
(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