

**NEVADA FINANCIAL DISCLOSURE STATEMENT**  
(Attach additional sheets if necessary.)

**RECEIVED**  
JAN 17 2006  
**COMMISSION ON ETHICS**

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LENGTH OF RESIDENCE IN NEVADA 54  
LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE [per NRS 281.571(1)(a)] 19  
E-MAIL \_\_\_\_\_

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  | CANDIDATE  | APPOINTMENT  |
|--------------------------|------------------------------|----------------------------|------------------------|---|--|--|
|                          |                              |                            |                        | all elected and appointed public officers (no later than Jan. 15 each year)<br>NRS 281.558(1)(b)<br>281.561(1)(b) | (no later than the 10 <sup>th</sup> day after the last day to qualify as a candidate)<br>NRS 281.561(1)(a) | to fill unexpired term of an elected or appointed public officer (within 30 days)<br>NRS 281.558(1)(a) |
| <u>Public Works Dir.</u> |                              | <u>\$4600<del>00</del></u> |                        | <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 years of age [NRS 281.571, Subsection 1(b)]:

| Source of Income        | Self                                | Household Member                    |
|-------------------------|-------------------------------------|-------------------------------------|
| <u>City of Wells</u>    | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <u>Renie's Greenies</u> | <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"/>            |

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                                | Household Member         |
|--------------------------------|-------------------------------------|--------------------------|
| <u>Sallie May Student loan</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"/> |