

RECEIVED

JAN 14 2008

NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

(Please read the instructions before completing.)

COMMISSION ON ETHICS

PERSONAL INFORMATION:

|  |  |
|--|--|
| NAME: <u>CHRIS AULT</u>                  | LENGTH OF RESIDENCE IN NEVADA: <u>39 years</u>   |
| ADDRESS: <u>1104 Slovaks Court</u>       |  |
| CITY, STATE, ZIP: <u>Reno, NV. 89511</u> | LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (NRS 281A.620(1)(a)): <u>39 years</u> |
| TELEPHONE: <u>(775) 240-4427</u>         | E-MAIL: <u>cault@red.state.nv.us</u>   |

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 10<sup>th</sup> 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)

| 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(s) |
|-----------------------------|---|---------------------|------------------------|--|-----------------------------|-------------------------------|
| <u>Deputy Administrator</u> | <u>A</u>  | <u>\$ 78,124</u>    | <u>07-02-07</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"/>      |

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)]:

| Source of Income                                   | Self                                | Household Member                    |
|--|-------------------------------------|-------------------------------------|
| <u>Deputy Administrator - Real Estate Division</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <u>WCS'D - Speech Pathologist</u>                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
|  | <input type="checkbox"/>            | <input type="checkbox"/>            |
|  | <input type="checkbox"/>            | <input 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) located in this state or an adjacent state [NRS 281A.620.1(c)]:

| Specific Location | Particular Use |
|-------------------|----------------|
| <u>N/A</u>        | <u>N/A</u>     |
|                   |                |
|                   |                |
|                   |                |

[Redacted box]

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         |
|-----|--------------------------|--------------------------|
| N/A | <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)]:

| Donor | Gift | Value of Gift |
|-------|------|---------------|
| N/A   |      | \$            |
|       |      | \$            |
|       |      | \$            |
|       |      | \$            |

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         |
|-----|--------------------------|--------------------------|
| N/A | <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: 01-10-08

Signature: [Handwritten Signature]
Print name: CHARLES FULT

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