



NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

- Please read instructions carefully before completing. -

FILED

Jan 15 2015

BARBARA K.
CEGAVSKE
SECRETARY OF
STATE

Date Filed

NAME: <small>(First, Middle, Last)</small>	Adam Paul Laxalt	ADDRESS: <small>(Number, Street)</small>	P.O. Box 97801		
CITY, STATE, ZIP:	Las Vegas, NV, 89193	TELEPHONE:	702-361-7940		
EMAIL:	adam@adamlaxaltforag.com	LENGTH OF RESIDENCE IN NEVADA (Years):	4	LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (Years):	3

SECTION A (Information about your public office): List all public offices for which this financial disclosure statement is required NRS 281.571(1)(g) Please indicate **why** you are filing this form by choosing the appropriate box below.

- **ANNUAL FILING:** Filed by elected and appointed officers (if required) no later than January 15th each year.
- **CANDIDATE FILING:** Filed by candidates for public office no later than the 10th day after the last day to qualify as a candidate.
- **NEWLY APPOINTED:** Filed when appointed to fill an unexpired term of an elected or appointed public officer no later than the 30th day following appointment.

TYPE OF FILING (check one): **Annual** **Candidate** **New Appointment**

TITLE OF PUBLIC OFFICE AND NAME OF GOVERNMENT <small>(Include the title of the office you hold or are seeking, and the name of the entity that employs this position e.g. 'City Manager', 'City of XYZ')</small>	Elected (E), appointed (A) or appointed <u>to</u> an elected (AE) office.	Is this position entitled to annual compensation of \$6,000 or more?	Amount of compensation received annually	Date elected or appointed
Attorney General	E	Yes	\$133,000.00	11/4/2014

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 281.571(1)(b)]:

SOURCES OF INCOME	Self	Household Member
Adam P. Laxalt, P.C.	<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 281.571(1)(c)]:

SPECIFIC LOCATION (Address, City, State)	PARTICULAR USE (Rental, Vacation, Land etc.)
None	

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 281.571(1)(d)]:

CREDITOR NAME	Self	Household Member
Mohela	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Nelnet	<input checked="" type="checkbox"/>	<input type="checkbox"/>

CREDITOR NAME	Self	Household Member
Great Lakes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Great Lakes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Bank of America	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
USAA MasterCard	<input checked="" type="checkbox"/>	<input checked="" 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 281.571(1)(e)]:

DONOR NAME	DESCRIPTION OF GIFT	VALUE OF GIFT
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 281.571(1)(f)]:

BUSINESS ENTITY	Self	Household Member
Adam P. Laxalt, P.C.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Adam Paul Laxalt

Signature

01/15/2015

Date