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**CONTRIBUTIONS AND EXPENSES REPORT**

**State of Nevada**

<b>Frank Eugene Hunewill</b> Name	<b>Sheriff, Lyon County</b> Office (if applicable)	<b>Smith Valley</b> District (if applicable)
<b>41 Wild Peach Lane, Wellington, Nv, 89444</b> Mailing Address		<b>775-267-7773</b> Telephone No.
<b>hunewill48@gmail.com</b> E-Mail Address		

Select Appropriate Box(es)  CANDIDATE  LEGAL DEFENSE FUND [What is this?](#)  AMENDED

- [Report #1 - Due April 15, 2022](#)  
Period: Jan 01, 2022 - Mar 31, 2022
- [Report #2 - Due July 15, 2022](#)  
Period: Apr 01, 2022 - Jun 30, 2022
- [Report #3 - Due October 15, 2022](#)  
Period: Jul 01, 2022 - Sep 30, 2022
- [Report #4 - Due January 15, 2023](#)  
Period: Oct 01, 2022 - Dec 31, 2022
- [Annual Filing - Due January 15, 2023](#)  
Period: Jan 01, 2022 - Dec 31, 2022

**FILED**  
Jul 13 2022

**BARBARA K. CEGAVSKE**  
**SECRETARY OF STATE**

FOR OFFICE USE ONLY

\* Report #4 suffices for the 2023 Annual CE Filing only if Report #'s 1, 2, 3, are previously filed this period.

**CONTRIBUTIONS SUMMARY**

	This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
1. Total Monetary Contributions Received in Excess of \$100	\$ 12,700.00	\$ 13,200.00
2. Total Monetary Contributions in the Form of Loans Guaranteed by a 3rd-Party in Excess of \$100	\$ 0.00	\$ 0.00
3. Total Monetary Contributions in the Form of Loans that were Forgiven in Excess of \$100	\$ 0.00	\$ 0.00
4. Total Amount of Written Commitments for Contributions in Excess of \$100	\$ 0.00	\$ 0.00
5. Total Value of In Kind Contributions in Excess of \$100	\$ 0.00	\$ 0.00
6. Total Value of Written Commitments for In Kind Contributions in Excess of \$100	\$ 0.00	\$ 0.00
7. Total Amount of all Contributions of \$100 or less	\$ 100.00	\$ 200.00
<b>8. Total Amount of All Contributions (Add Lines 1 through 7)</b>	<b>\$ 12,800.00</b>	<b>\$ 13,400.00</b>

**EXPENSES SUMMARY**

9. Total Monetary Expenses Paid in Excess of \$100	\$ 1,995.10	\$ 4,979.31
10. Total Value In Kind Expenses in Excess of \$100	\$ 0.00	\$ 0.00
11. Total Amount of all Expenses of \$100 or less	\$ 154.02	\$ 154.02
<b>12. Total Amount of All Expenses (Add Lines 9 through 11)</b>	<b>\$ 2,149.12</b>	<b>\$ 5,133.33</b>

**ENDING FUND BALANCE**

<b>13. Fund balance at the end of the reporting period</b>	<b>\$ 8266.67</b>
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**AFFIRMATION**

- I Declare Under Penalty of Perjury That the Foregoing is True and Correct.  
AND  
 I have agreed to the following terms and conditions:

I declare, under penalty of perjury or under an oath to God, that the information I submitted herein to the Secretary of State for the State of Nevada is true and correct, and is not submitted for any improper purpose, and that I am authorized to submit the information, and to the best of my knowledge complies with NRS Chapter 294A. I have reviewed the NRS 225.083 Notice. I understand it is unlawful to submit any illegal, unauthorized, fraudulent, forged, deceptive, defamatory, illicit, or improper information, as defined by state and federal law, to the Secretary of State, and agree to indemnify the Secretary of State, and any other parties entitled thereto, for any damages incurred for any unlawful, unauthorized, fraudulent, forged, deceptive, defamatory, illicit, or improper information, as defined by the federal and state law, submitted to the Secretary of State by my use of this electronic filing system. I further understand that I may be subject to criminal (NRS 239.330) and/or civil (NRS 225.084) penalties for submitting any unlawful unauthorized, fraudulent, forged, deceptive, defamatory, illicit, or improper information, as defined by federal and state law. I understand and agree that all information submitted is the property of the Secretary of State, and may be monitored for all lawful purposes. I further understand that during such monitoring, all information, including personal information placed on this system, may be examined, copied, and used for any authorized purpose. By submitting this report I intend to identify myself as the authorized person signing this document and with the present intent to authenticate my signature as such.



Frank Hunewill

07/13/2022

Signature

Date

**MONETARY CONTRIBUTIONS**

Report Period

# 2

Frank Eugene Hunewill

Sheriff, Lyon County

Smith Valley

Name (print)

Office (if applicable)

District (if applicable)

**MONETARY CONTRIBUTIONS IN EXCESS OF \$100 OR,  
WHEN ADDED TOGETHER FROM ONE CONTRIBUTOR, THAT EXCEED \$100**

(Transfer Total Amount of All Monetary Contributions to Lines 1, 2, or 3, As Applicable, of Contributions Summary)

<u>NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO MADE CONTRIBUTION</u>	<u>DATE OF CONTRIBUTION</u>	<u>AMOUNT OF CONTRIBUTION</u>	<u>CHECK HERE IF LOAN</u>	<u>NAME AND ADDRESS OF 3rd PARTY IF LOAN GUARANTEED BY 3rd PARTY</u>	<u>NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR</u>
<a href="#">Nevada Fresh Pak</a> 107 Mcleod Street Yerington, NV 89447	05/03/2022	\$2,500.00			
<a href="#">JIM FERRARA</a> 298 ARTESIA ROAD SMITH VALLEY, NV 89444	05/26/2022	\$100.00			
<a href="#">Jose Miguel Montero</a> 2550 Granite Springs Road Reno, Nv 89519	06/07/2022	\$5,000.00			
<a href="#">Carlos L. Bonilla</a> 1431 Laughing Chukar Lane Sparks, NV 89441	06/07/2022	\$5,000.00			
<a href="#">Alfred L. Tamagni</a> 7001 Oakwood Dr. Anchorage, AK 99507	06/15/2022	\$200.00			

**WRITTEN COMMITMENTS**

Report Period

# 2

Frank Eugene Hunewill

Sheriff, Lyon County

Smith Valley

Name (print)

Office (if applicable)

District (if applicable)

**WRITTEN COMMITMENTS FOR CONTRIBUTIONS IN EXCESS OF \$100 OR,  
WHEN ADDED TOGETHER FROM ONE ENTITY, THAT EXCEED \$100**

(Transfer Total Amount of All Written Commitments to Line 4 of Contributions Summary)









**EXPENSE CATEGORIES**

Report Period

# 2

**Frank Eugene Hunewill**  
Name (print)

**Sheriff, Lyon County**  
Office (if applicable)

**Smith Valley**  
District (if applicable)

**EXPENSE CATEGORIES (NRS 294A.365)**

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
Expenses related to legal defense fund	I
Goods and services provided in kind for which money would otherwise have been paid	J
Contributions made to: (i) another candidate; (ii) a nonprofit corporation that is registered or required to be registered pursuant to NRS 294A.225; (iii) a PAC that is registered or required to be registered pursuant to NRS 294A.230; or (iv) a Recall Committee that is registered or required to be registered pursuant to NRS 294A.250	K



Fees for filing declarations of candidacy or acceptances of candidacy	L
Repayments or forgiveness of loans	M
Disposal of unspent contributions pursuant to NRS 294A.160	N
Other miscellaneous expenses	O

1 NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached hereto.

**MONETARY EXPENSES**

Report Period

# 2

Frank Eugene Hunewill  
Name (print)

Sheriff, Lyon County  
Office (if applicable)

Smith Valley  
District (if applicable)

**MONETARY EXPENSES IN EXCESS OF \$100**

(Transfer Total Amount of All Campaign Expenses to Line 9 of Expenses Summary)

<u>NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE</u>	<u>CATEGORY (NRS 294A.365)</u>	<u>DATE OF EXPENSE</u> ↑	<u>AMOUNT OF EXPENSE</u>
<u>Renner equipment</u> 402 W. Bridge St. Yerington, Nv 89447	D	04/01/2022	\$53.97
<u>Sticks &amp; Stones Building Materials, Inc.</u> 302 S. Main Street Yerington, NV 89447	D	04/08/2022	\$300.38
	D	06/25/2022	\$192.46
<u>Flying J</u> 1880 W Winnemucca Blvd Winnemucca, NV 89445	C	05/12/2022	\$75.45
<u>Topaz Lodge &amp; Casino</u> 1979 Highway 395 South Gardnerville, Nv 89410	C	05/26/2022	\$117.37
	C	06/22/2022	\$105.52
<u>Golfn 4 U!</u> PO Box 1563 Gardnerville, NV 89410	H	05/31/2022	\$275.00
<u>Arco Gasoline</u> 1676 US Hwy 395 N Minden, NV 89423	C	06/10/2022	\$100.35
<u>Golden Gate Petroleum</u> 1001 Gold Field Ave Yerington, NV 89447	C	06/12/2022	\$101.12
	C	06/25/2022	\$96.04
<u>True Value Hardware</u> 401 West Goldfield Yerington, NV 89447	D	06/25/2022	\$24.60
<u>Studio 33</u> 1405 State Route 208 Yerington, NV 89447	D	06/27/2022	\$706.86





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**CONTRIBUTIONS AND EXPENSES REPORT**

**State of Nevada**

<b>Frank Eugene Hunewill</b> Name	<b>Sheriff, Lyon County</b> Office (if applicable)	<b>Smith Valley</b> District (if applicable)
<b>41 Wild Peach Lane, Wellington, Nv, 89444</b> Mailing Address		<b>775-267-7773</b> Telephone No.
<b>hunewill48@gmail.com</b> E-Mail Address		

Select Appropriate Box(es)  CANDIDATE  LEGAL DEFENSE FUND [What is this?](#)  AMENDED

- [Report #1 - Due April 15, 2022](#)  
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Period: Oct 01, 2022 - Dec 31, 2022
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Period: Jan 01, 2022 - Dec 31, 2022

**FILED**  
May 18 2022

**BARBARA K. CEGAVSKE**  
**SECRETARY OF STATE**

FOR OFFICE USE ONLY

\* Report #4 suffices for the 2023 Annual CE Filing only if Report #'s 1, 2, 3, are previously filed this period.

**CONTRIBUTIONS SUMMARY**

	This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period
1. Total Monetary Contributions Received in Excess of \$100	\$ 500.00	\$ 500.00
2. Total Monetary Contributions in the Form of Loans Guaranteed by a 3rd-Party in Excess of \$100	\$ 0.00	\$ 0.00
3. Total Monetary Contributions in the Form of Loans that were Forgiven in Excess of \$100	\$ 0.00	\$ 0.00
4. Total Amount of Written Commitments for Contributions in Excess of \$100	\$ 0.00	\$ 0.00
5. Total Value of In Kind Contributions in Excess of \$100	\$ 0.00	\$ 0.00
6. Total Value of Written Commitments for In Kind Contributions in Excess of \$100	\$ 0.00	\$ 0.00
7. Total Amount of all Contributions of \$100 or less	\$ 100.00	\$ 100.00
<b>8. Total Amount of All Contributions (Add Lines 1 through 7)</b>	<b>\$ 600.00</b>	<b>\$ 600.00</b>

**EXPENSES SUMMARY**

9. Total Monetary Expenses Paid in Excess of \$100	\$ 2,984.21	\$ 2,984.21
10. Total Value In Kind Expenses in Excess of \$100	\$ 0.00	\$ 0.00
11. Total Amount of all Expenses of \$100 or less	\$ 0.00	\$ 0.00
<b>12. Total Amount of All Expenses (Add Lines 9 through 11)</b>	<b>\$ 2,984.21</b>	<b>\$ 2,984.21</b>

**ENDING FUND BALANCE**

<b>13. Fund balance at the end of the reporting period</b>	<b>\$ 0.00</b>
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**AFFIRMATION**

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

AND

I have agreed to the following terms and conditions:

I declare, under penalty of perjury or under an oath to God, that the information I submitted herein to the Secretary of State for the State of Nevada is true and correct, and is not submitted for any improper purpose, and that I am authorized to submit the information, and to the best of my knowledge complies with NRS Chapter 294A. I have reviewed the NRS 225.083 Notice. I understand it is unlawful to submit any illegal, unauthorized, fraudulent, forged, deceptive, defamatory, illicit, or improper information, as defined by state and federal law, to the Secretary of State, and agree to indemnify the Secretary of State, and any other parties entitled thereto, for any damages incurred for any unlawful, unauthorized, fraudulent, forged, deceptive, defamatory, illicit, or improper information, as defined by the federal and state law, submitted to the Secretary of State by my use of this electronic filing system. I further understand that I may be subject to criminal (NRS 239.330) and/or civil (NRS 225.084) penalties for submitting any unlawful unauthorized, fraudulent, forged, deceptive, defamatory, illicit, or improper information, as defined by federal and state law. I understand and agree that all information submitted is the property of the Secretary of State, and may be monitored for all lawful purposes. I further understand that during such monitoring, all information, including personal information placed on this system, may be examined, copied, and used for any authorized purpose. By submitting this report I intend to identify myself as the authorized person signing this document and with the present intent to authenticate my signature as such.

Frank Hunewill

05/18/2022

Signature

Date

**MONETARY CONTRIBUTIONS**

Report Period

# 1

Frank Eugene Hunewill

Sheriff, Lyon County

Smith Valley

Name (print)

Office (if applicable)

District (if applicable)

**MONETARY CONTRIBUTIONS IN EXCESS OF \$100 OR,  
WHEN ADDED TOGETHER FROM ONE CONTRIBUTOR, THAT EXCEED \$100**

(Transfer Total Amount of All Monetary Contributions to Lines 1, 2, or 3, As Applicable, of Contributions Summary)

<u>NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO MADE CONTRIBUTION</u>	<u>DATE OF CONTRIBUTION</u> ↑	<u>AMOUNT OF CONTRIBUTION</u>	<u>CHECK HERE IF LOAN</u>	<u>NAME AND ADDRESS OF 3rd PARTY IF LOAN GUARANTEED BY 3rd PARTY</u>	<u>NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR</u>
Dianne Farias P.O. Box 27 Wellington, NV 89444	03/21/2022	\$500.00			

**WRITTEN COMMITMENTS**

Report Period

# 1

Frank Eugene Hunewill

Sheriff, Lyon County

Smith Valley

Name (print)

Office (if applicable)

District (if applicable)

**WRITTEN COMMITMENTS FOR CONTRIBUTIONS IN EXCESS OF \$100 OR,  
WHEN ADDED TOGETHER FROM ONE ENTITY, THAT EXCEED \$100**

(Transfer Total Amount of All Written Commitments to Line 4 of Contributions Summary)

<u>NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO MADE THE COMMITMENT</u>	<u>DATE OF COMMITMENT</u> ↑	<u>AMOUNT OF COMMITMENT</u>











**EXPENSE CATEGORIES (NRS 294A.365)**

<b>CATEGORIES</b>	<b>CODE</b>
Office expenses	<b>A</b>
Expenses related to volunteers	<b>B</b>
Expenses related to travel	<b>C</b>
Expenses related to advertising	<b>D</b>
Expenses related to paid staff	<b>E</b>
Expenses related to consultants	<b>F</b>
Expenses related to polling	<b>G</b>
Expenses related to special events	<b>H</b>
Expenses related to legal defense fund	<b>I</b>
Goods and services provided in kind for which money would otherwise have been paid	<b>J</b>
Contributions made to: (i) another candidate; (ii) a nonprofit corporation that is registered or required to be registered pursuant to NRS 294A.225; (iii) a PAC that is registered or required to be registered pursuant to NRS 294A.230; or (iv) a Recall Committee that is registered or required to be registered pursuant to NRS 294A.250	<b>K</b>
Fees for filing declarations of candidacy or acceptances of candidacy	<b>L</b>
Repayments or forgiveness of loans	<b>M</b>
Disposal of unspent contributions pursuant to NRS 294A.160	<b>N</b>
Other miscellaneous expenses	<b>O</b>

1 NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached hereto.

**MONETARY EXPENSES**

Report Period

# 1

Frank Eugene Hunewill

Sheriff, Lyon County

Smith Valley



Name (print)

Office (if applicable)

District (if applicable)

**MONETARY EXPENSES IN EXCESS OF \$100**

(Transfer Total Amount of All Campaign Expenses to Line 9 of Expenses Summary)

<u>NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE</u>	<u>CATEGORY (NRS 294A.365)</u>	<u>DATE OF EXPENSE</u> ↑	<u>AMOUNT OF EXPENSE</u>
Studio 33 1405 State Route 208 Yerington, NV 89447	D	02/15/2022	\$280.27
	D	02/17/2022	\$2,703.94

**IN KIND EXPENSES**

Report Period

# 1

Frank Eugene Hunewill  
Name (print)

Sheriff, Lyon County  
Office (if applicable)

Smith Valley  
District (if applicable)

**IN KIND EXPENSES IN EXCESS OF \$100**

(Transfer Total Value of All In-Kind Expenses to Line 10 of Expenses Summary)

<u>NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD OR SERVICE</u>	<u>DESCRIPTION OF IN KIND EXPENSE</u>	<u>DATE OF IN KIND EXPENSE</u> ↑	<u>VALUE OR COST OF IN KIND EXPENSE</u>


EL201  
Revised: 8-13-13  
NRS 294A.120; 294A.125;  
294A.160; 294A.200;  
294A.362; 294A.373



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## NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

- Please read instructions carefully before completing. -

**FILED**  
May 18 2022  
BARBARA K.  
CEGAVSKE  
SECRETARY OF  
STATE  
Date Filed

<b>NAME:</b> (First, Middle, Last)	Frank Eugene Hunewill	<b>ADDRESS:</b> (Number, Street)	41 Wild Peach Lane		
<b>CITY, STATE, ZIP:</b>	Wellington, Nv, 89444	<b>TELEPHONE:</b>	775-267-7773		
<b>EMAIL:</b>	hunewill48@gmail.com	<b>LENGTH OF RESIDENCE IN NEVADA (Years):</b>	54	<b>LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (Years):</b>	54

**SECTION 1** (Information about your public office): List all public offices for which this financial disclosure statement is required [NRS 281.571(8)]. 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.

**TYPE OF FILING** (check one):

**Annual**

**Candidate**

TITLE OF PUBLIC OFFICE AND NAME OF GOVERNMENT (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')	Elected (E), or Candidate running for office (C)	Is this position entitled to annual compensation of \$6,000 or more?	Amount of compensation received annually	Date elected or appointed
Lyon County Sheriff	E	Yes	\$100,000.00	1/7/2019

**SECTION 2** (Sources of Income): List each source of your income (in addition to any source listed in Section 1), or that of any member of your household who is 18 years of age or older. [NRS 281.571(2)]:

SOURCES OF INCOME	Self	HouseHoldMember
Lyon County sheriff's Office	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lahontan Paramedical	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**SECTION 3** (Real Property): List specific location and particular use of all real estate (other than personal residence): **(a)** in which you or a member of your household has a legal or beneficial interest; **(b)** the fair market value of which is \$2,500 or more; and **(c)** which is located in this state or an adjacent state [NRS 281.571(3)]:

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

**SECTION 4** (Creditors): List each creditor to whom you or a member of your household owes \$5,000 or more **EXCEPT:** **(a)** debt secured by mortgage or deed of trust on real property which is not required to be listed in Section 3 above; and **(b)** debt for which a security interest in a motor vehicle for personal use was retained by seller [NRS 281.571(4)]:

CREDITOR NAME	Self	HouseHoldMember



CREDITOR NAME	Self	HouseHoldMember
Bank of America	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wells Fargo Bank	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**SECTION 5 (Meetings, Events, Trips):** List all educational or informational meetings, events or trips you or a member of your household have taken during the filing period including **(a)** the purpose and location of the meeting, event or trip and the name of the organization conducting, sponsoring, hosting or requesting the meeting, event or trip; **(b)** the identity of each interested person providing anything of value to you or a member of your household to undertake or attend the meeting, event or trip; and **(c)** the aggregate value of everything provided by those interested persons to you or a member of your household to undertake or attend the meeting, event or trip [NRS 281.571(5)]. Please note this information is only required for meetings, events or trips taken after December 31, 2015.

SPECIFIC LOCATION (Address, City, State)	NAME OF ORGANIZATION	PURPOSE	NAME OF INTERESTED PARTIES	DESCRIPTION OF ITEM PROVIDED, AND VALUE	Self	HouseHoldMember
None						

**SECTION 6 (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: (a)** a gift received from a person who is related to you within the third degree of consanguinity or affinity; and **(b)** 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(6)]:

NAME OF DONOR	DESCRIPTION OF GIFT	VALUE OF GIFT
None		

**SECTION 7 (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(7)]:

BUSINESS ENTITY	Self	HouseHoldMember
None		

**THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.**

Frank Hunewill

Signature

05/18/2022

Date



[Print Help?](#)



## NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS)

- Please read instructions carefully before completing. -

**FILED**  
Jan 3 2022  
BARBARA K.  
CEGAVSKE  
SECRETARY OF  
STATE  
Date Filed

<b>NAME:</b> <small>(First, Middle, Last)</small>	Frank Eugene Hunewill	<b>ADDRESS:</b> <small>(Number, Street)</small>	41 Wild Peach Lane		
<b>CITY, STATE, ZIP:</b>	Wellington, Nv, 89444	<b>TELEPHONE:</b>	775-267-7773		
<b>EMAIL:</b>	hunewill48@gmail.com	<b>LENGTH OF RESIDENCE IN NEVADA (Years):</b>	54	<b>LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE (Years):</b>	54

**SECTION 1** (Information about your public office): List all public offices for which this financial disclosure statement is required [NRS 281.571(8)]. Please indicate **why** you are filing this form by choosing the appropriate box below.

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- **CANDIDATE FILING:** Filed by candidates for public office no later than the 10th day after the last day to qualify as a candidate.

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

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), or Candidate running for office (C)	Is this position entitled to annual compensation of \$6,000 or more?	Amount of compensation received annually	Date elected or appointed
Lyon County Sheriff	E	Yes	\$100,000.00	1/7/2019

**SECTION 2** (Sources of Income): List each source of your income (in addition to any source listed in Section 1), or that of any member of your household who is 18 years of age or older. [NRS 281.571(2)]:

SOURCES OF INCOME	Self	HouseHoldMember
Lyon County sheriff's Office	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lahontan Paramedical	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**SECTION 3** (Real Property): List specific location and particular use of all real estate (other than personal residence): **(a)** in which you or a member of your household has a legal or beneficial interest; **(b)** the fair market value of which is \$2,500 or more; and **(c)** which is located in this state or an adjacent state [NRS 281.571(3)]:

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

**SECTION 4** (Creditors): List each creditor to whom you or a member of your household owes \$5,000 or more **EXCEPT:** **(a)** debt secured by mortgage or deed of trust on real property which is not required to be listed in Section 3 above; and **(b)** debt for which a security interest in a motor vehicle for personal use was retained by seller [NRS 281.571(4)]:

CREDITOR NAME	Self	HouseHoldMember



CREDITOR NAME	Self	HouseHoldMember
Bank of America	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wells Fargo Bank	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**SECTION 5 (Meetings, Events, Trips):** List all educational or informational meetings, events or trips you or a member of your household have taken during the filing period including **(a)** the purpose and location of the meeting, event or trip and the name of the organization conducting, sponsoring, hosting or requesting the meeting, event or trip; **(b)** the identity of each interested person providing anything of value to you or a member of your household to undertake or attend the meeting, event or trip; and **(c)** the aggregate value of everything provided by those interested persons to you or a member of your household to undertake or attend the meeting, event or trip [NRS 281.571(5)]. Please note this information is only required for meetings, events or trips taken after December 31, 2015.

SPECIFIC LOCATION (Address, City, State)	NAME OF ORGANIZATION	PURPOSE	NAME OF INTERESTED PARTIES	DESCRIPTION OF ITEM PROVIDED, AND VALUE	Self	HouseHoldMember
None						

**SECTION 6 (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:** **(a)** a gift received from a person who is related to you within the third degree of consanguinity or affinity; and **(b)** 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(6)]:

NAME OF DONOR	DESCRIPTION OF GIFT	VALUE OF GIFT
None		

**SECTION 7 (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(7)]:

BUSINESS ENTITY	Self	HouseHoldMember
None		

**THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.**

Frank Hunewill

Signature

01/03/2022

Date