

ROSS MILLER Secretary of State Elections Division 101 North Carson Street, Suite 3 Carson City, Nevada 89701-4768 Phone: (775) 684-5705 Fax: (775) 684-5718 Website: www.nvsos.gov KRut

02/03/2014

Office of the Secretary of State Ross Miller Elections Division

## State of Nevada Committee for Political Action (PAC)

Registration Form

ABOVE SPACE IS FOR OFFICE USE ONLY PAC (Advocating Passage or Defeat of a Ballot Question) **New Registration** Annual (Due on or before January 15th of each year; NRS 294A.230(3)(b)) Amended Registration: Change Officers Change Registered Agent Change Address check all that apply Change Name Previous Name of PAC Other: Name of Committee: Our Vote Nevada PAC Telephone: 775 787 6017 Mailing Address: P.O. Box 8262-1802 Rainbow Ridge Rd. Reno Street Name, Number NV 89507 State Zip Code PURPOSE: Briefly state the purpose for which the PAC was organized. To advocate for the Voter ID initiative petition Constitutional amendment. REGISTERED AGENT: pursuant to NRS 294A.240, each PAC must appoint and keep in the State a registered agent, as provided in NRS 14.020, who must be a natural person who resides in the State of Nevada. Name of Registered Agent: Telephone: Sharron Angle 775 787 6017 Physical Address: 1812 Rain bow Ridge Rd Street Name, Number Reno REGISTERED AGENT ACCEPTANCE: I hereby accept appointment as Registered Agent for the above-named Committee for Political Action. Date:

EL400.01 Revised: 8-1-13



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Registration Form

OFFICERS: List the name, title, a necessary).	address and telephone number of each	officer (attach additional pages if
Officer Name and Title:		
Robert Fee Sec/Treas Mailing Address:		Telephone: 775 787 60/7
P.O. Box 8262	Reno	NV 89507
Street Name, Number	City	State Zip Code
Officer Name and Title:		Telephone:
Mailing Address:		
Street Name, Number	City	State Zip Code
Officer Name and Title:	Name and Title:	
Mailing Address:		
Street Name, Number	Ct.	
Officer Name and Title:	City	State Zip Code Telephone:
Mailing Address:		
Street Name, Number	City	State Zip Code
Name of Organization:  Our Voice PAC  Mailing Address:	ated with any other organizations, list the additional pages if necessary).	Telephone: 775 787 60/7
P.O. Box 8262	Reno	NV 89507
Street Name, Number Name of Organization:	City	State Zip Code Telephone:
Mailing Address:		
treet Name, Number	City	State Zip Code
lame of Organization:		Telephone:
Mailing Address:		
treet Name, Number	City	State Zip Code
UBMITTED BY:	Printed Name: Sharron Angle	Date: Telephone:
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