ORIGINAL

#1267

Committee for Political Action (PAC) Registration Form

State of Nevada

FILE

MAR 29 2005

DEAN HELLER
SECRETARY OF STATE

Print or type the following information; complete both sides of this registration form:

REGISTRATION: (check one) ☒ New registration ☐ Amended registration (if amended list reason)

REASON FOR AMENDMENT: ☐ Change in officers ☐ Change resident agent
☐ Other _____

NAME OF COMMITTEE: ACEC NEVADA PAC

Mailing Address: P.O. BOX 97077

LAS VEGAS (City) NV (State) 89193 (Zip)

Telephone Number: 702-877-5633 **Facsimile Number:** 702-897-2441

Email Address: _____ **Website Address:** WWW.ACECNV.ORG

PURPOSE: (Briefly state the purpose for which the political action committee was organized.)
To promote the business of engineering and general public health, safety & welfare

RESIDENT AGENT: (Pursuant to NRS 294A.260, each committee for political action must appoint and keep in this state a resident agent who must be a natural person who resides in the State of Nevada.)

Name of Resident Agent: RITA MONROE

Mailing Address: 40 Tidwell LN

Henderson (City) NV (State) 89074 (Zip)

Telephone Number: 702-897-2028 **Facsimile Number:** —

Email Address: rmonroe@ACECNV.ORG **Website Address:** —

ACCEPTANCE OF APPOINTMENT BY RESIDENT AGENT

I, RITA MONROE, hereby accept appointment as Resident Agent for the above named committee for political action.

Rita Monroe
Signature of Resident Agent

3-8-05
Date

OFFICERS: (Please list the name, title and address of each officer.)

Name	Address
Jeff Codega	433 W. PLUMB LN
Title: President	**City/State/Zip:** RENO NV 895
LARRY CARROLL	2601 N. TENAYA WAY
Title: PRESIDENT ELECT	**City/State/Zip:** LAS VEGAS, NV 89128
ALLEN GRAY	130 VINE ST
Title: Vice President	**City/State/Zip:** RENO NV 89503
WAYNE HORLACHER	2270 Corporate Cir Ste 100
Title: Sec'y	**City/State/Zip:** Henderson NV 89074
Cindy Potter	5370 Kietzke LN STE 200
Title: TREASURER	**City/State/Zip:** Reno NV 89511

AFFILIATION: (If the committee for political action is affiliated with any other organizations, list the name and address of each organization.)

Name of Organization:	Address:
N/A	

Submitted By: Wayne Horlacher

Wayne Horlacher, Secy
Name of representative of group

3/15/05
Date

Send Completed Form to:
SECRETARY OF STATE
101 NORTH CARSON STREET #3
CARSON CITY, NEVADA 89701-4786
PHONE: (775) 684-5705 FAX: (775) 684-5718

Prescribed by Secretary of State
NRS 294A.230
EL400 (rev. 12/01)