

AT&T



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

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01/16/14

Office of the
Secretary of State

Ross Miller
Elections Division

#1936

**State of Nevada
Committee for Political Action
(PAC)
Registration Form
Page 1**

ABOVE SPACE IS FOR OFFICE USE ONLY

- New Registration
- PAC (Advocating Passage or Defeat of a Ballot Question)
- 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:
AT&T Nevada Employee Political Action Committee

Telephone:
775.333.8504

Mailing Address:
645 E. Plumb Lane, C142
Street Name, Number

Reno
City

NV 89502
State Zip Code

PURPOSE: Briefly state the purpose for which the PAC was organized.

To encourage and facilitate voluntary citizen participation in state and local government.

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:
Kris Wells

Telephone:
775.333.3000

Physical Address:
645 E. Plumb Lane, C142
Street Name, Number

Reno
City

NV 89502
State Zip Code

REGISTERED AGENT ACCEPTANCE: I hereby accept appointment as Registered Agent for the above-named Committee for Political Action.

Date:
01/09/2014

Signature of Registered Agent



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OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages if necessary).

Officer Name and Title: Patty Oliphant, Assistant Treasurer Telephone: 775.858.1717

Mailing Address: 1373 Capital Boulevard, Suite 101 Reno NV 89502
 Street Name, Number City State Zip Code

Officer Name and Title: Teri Kiapos, Assistant Secretary Telephone: 775.448.9266

Mailing Address: 745 W. Moana Lane, Suite 220B Reno NV 89509
 Street Name, Number City State Zip Code

Officer Name and Title: _____ Telephone: _____

CONTINUED ON NEXT PAGE

Mailing Address: _____
 Street Name, Number City State Zip Code

Officer Name and Title: _____ Telephone: _____

Mailing Address: _____
 Street Name, Number City State Zip Code

AFFILIATIONS: If the PAC is affiliated with any other organizations, list the name, address and telephone number of each organization (please attach additional pages if necessary).

Name of Organization: _____ Telephone: _____

Mailing Address: _____
 Street Name, Number City State Zip Code

Name of Organization: _____ Telephone: _____

Mailing Address: _____
 Street Name, Number City State Zip Code

Name of Organization: _____ Telephone: _____

Mailing Address: _____
 Street Name, Number City State Zip Code

SUBMITTED BY:

X _____
 Signature of Representative of Group

Printed Name: _____
 Date: _____
 Telephone: _____
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OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages if necessary).

Officer Name and Title: Stephanie Tyler, President Telephone: 775.333.8500

Mailing Address: 645 E. Plumb Lane, B132 Reno NV 89502
 Street Name, Number City State Zip Code

Officer Name and Title: Randy J. Brown, CPA, Vice-President Telephone: 775.333.8504

Mailing Address: 645 E. Plumb Lane, C142 Reno NV 89502
 Street Name, Number City State Zip Code

Officer Name and Title: Kris Wells, Secretary Telephone: 775.333.3000

Mailing Address: 645 E. Plumb Lane, C142 Reno NV 89502
 Street Name, Number City State Zip Code

Officer Name and Title: David A. Collier, Treasurer Telephone: 775.333.3986

Mailing Address: 645 E. Plumb Lane, C142 Reno NV 89502
 Street Name, Number City State Zip Code

AFFILIATIONS: If the PAC is affiliated with any other organizations, list the name, address and telephone number of each organization (please attach additional pages if necessary).

Name of Organization: Telephone:

Mailing Address: Street Name, Number City State Zip Code

Name of Organization: Telephone:

Mailing Address: Street Name, Number City State Zip Code

Name of Organization: Telephone:

Mailing Address: Street Name, Number City State Zip Code

SUBMITTED BY:

X *Kris Wells*
 Signature of Representative of Group

Printed Name: Kris Wells Date: 01/09/2014 Telephone: 775.333.3000