

NVPAC



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

Office of the
Secretary of State
[Signature]
Ross Miller
Elections Division

KRut
01/24/12

#1693

**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: _____ Telephone: _____
NEVADA PAC (NVPAC) 702-944-1844

Mailing Address:
6217 FISHER LAS VEGAS NV 89130
Street Name, Number City State Zip Code

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

To collect contributions and support candidates, who are pro business, education, health and family and believe in protection the future of Nevada and its citizens.

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: _____
CONRAD VERGARA 702-656-3816

Mailing Address:
6217 FISHER LAS VEGAS NV 89130
Street Name, Number City State Zip Code

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

[Signature]
Signature of Registered Agent

Date: _____
01/24/2012



ROSS WELLEN
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

State of Nevada
**Committee for Political Action
(PAC)**
Registration Form
Page 2

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

Officer Name and Title: J. WATKINS, CHAIRMAN Telephone: 702-608-3334

Mailing Address: 6217 FISHER AVE. LAS VEGAS NV 89130
Street Name, Number City State Zip Code

Officer Name and Title: DONALD KINDY, SECRETARY / TREASURER Telephone: 702-944-1844

Mailing Address: 5604 EUGENE AVE LAS VEGAS NV 89108
Street Name, Number City State Zip Code

Officer Name and Title: CONRAD VERGARA, DIRECTOR Telephone: 702-656-3816

Mailing Address: 6217 FISHER AVE LAS VEGAS NV 89130
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: N/A 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

Date: 01/24/2012 Telephone: 702-656-3816