Self Ins

ROSS MILLER
Secretary of State
Elections Division
101 North Carson Street, Suite 3
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Phone: (775) 684-5705
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05/22/2014

Office of the Secretary of State
Ross Miller
Elections Division

#1914

State of Nevada
Committee for Political Action (PAC)
Registration Form
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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: Self Insurer PAC

Telephone: 7027404380

Mailing Address: 175 East Reno Avenue Suite C-9 | Las Vegas | NV | 89119
Street Name, Number | City | State | Zip Code

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

The self insureres PAC is created for the purpose of promoting the goals of self insurers and insurers for workers compensation and guest liability.

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: Larry Bradley C/O Progroup Management

Telephone: 7027404380

Physical Address: 175 East Reno Suite C-9 | Las Vegas | NV | 89119
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.

X Larry Bradley
Signature of Registered Agent

Date: 5/19/2014

EL400.01
Revised: 8-1-13

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

Officer Name and Title: Larry Bradley President
Telephone: 7027404380
Mailing Address: 175 East Reno Suite C-9 | Las Vegas | NV | 89119
Street Name, Number | City | State | Zip Code

Officer Name and Title: Tina Sanchez Vice President
Telephone: 7026929586
Mailing Address: 71 East Harmon Ave | Las Vegas | NV | 89109
Street Name, Number | City | State | Zip Code

Officer Name and Title: Kim Forbes Secretary
Telephone: 7023252720
Mailing Address: 7301 W Peak Drive Suite 150 | Las Vegas | NV | 89128
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 nu mber of each organization (please attach additional pages if necessary).

Name of Organization: Nevada Self-Insurers Assocation
Telephone: 7027404380
Mailing Address: PO Box 34197 | Las Vegas | NV | 89133-4197
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 Kim Forbes
Signature of Representative of Group

Printed Name: Kim Forbes
Date: 5/19/2014
Telephone: 7023252720

EL400.01
Revised: 8-1-13