



BARBARA K. CEGAVSKE
 Secretary of State
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 SECRETARY OF STATE
 ELECTIONS DIVISION

#1177

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(4)(b))
- Amended Registration: Change Officers Change Registered Agent Change Address
 check all that apply
- Change Name
Previous Name of PAC
- Other:

Name of Committee:
 NEA Fund for Children and Public Education

Telephone:
 (202) 822-7255

Mailing Address:
 1201 16th Street NW Suite 418
Street Name, Number

Washington
City

DC 20036
State Zip Code

PAC Active Email Address: jtakacs@nea.org

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

To make contributions to and expenditures on behalf of federal and non-federal candidates and committees who are friends of public education.

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:
 Debbie Cahill

Telephone:
 (702) 733-7330

Physical Address:
 3511 East Harmon
Street Name, Number

Las Vegas
City

NV 89121
State Zip Code

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

signature on file

Date:
 n/a

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: Michael McPherson, Treasurer **Telephone:** (202) 822-7255
Mailing Address:
 1201 16th Street NW **Washington DC 20036**
 Street Name, Number **City State Zip Code**

Officer Name and Title: Lisa Robillard, Assistant Treasurer **Telephone:** (202) 822-7336
Mailing Address:
 1201 16th Street NW **Washington DC 20036**
 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: **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).

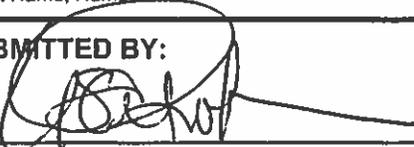
Name of Organization: National Education Association **Telephone:** (202) 822-7255
Mailing Address:
 1201 16th Street NW **Washington DC 20036**
 Street Name, Number **City State Zip Code**

Name of Organization: NEA Fund for Children and Public Education Non-Federal Itemized Account **Telephone:** (202) 822-7255
Mailing Address:
 1201 16th Street NW Suite 418 **Washington DC 20036**
 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: Lisa Robillard

Date: 1/15/16

Telephone: (202) 822-7255