



BARBARA K. CEGAVSKE  
 Secretary of State  
 Elections Division  
 101 North Carson Street, Suite 3  
 Carson City, Nevada 89701-3714  
 Phone: (775) 684-5705  
 Fax: (775) 684-5718  
 Website: www.nvsos.gov

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

**RECEIVED**

JAN 22 2016 *llm*

SECRETARY OF STATE  
 ELECTIONS DIVISION

#1798

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:  Telephone:

Mailing Address:

<input type="text" value="Five Moore Drive"/>	<input type="text" value="Durham"/>	<input type="text" value="NC"/>	<input type="text" value="27709"/>
<small>Street Name, Number</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>

PAC Active Email Address:

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

**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:

Physical Address:

<input type="text" value="7876 Pioneer Hills Street"/>	<input type="text" value="Las Vegas"/>	<input type="text" value="NV"/>	<input type="text" value="89113"/>
<small>Street Name, Number</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>

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

*Jennifer Hoge* Date:   
 Signature of Registered Agent



BARBARA K. CEGAVSKE  
 Secretary of State  
 Elections Division  
 101 North Carson Street, Suite 3  
 Carson City, Nevada 89701-3714  
 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).

<b>Officer Name and Title:</b>		<b>Telephone:</b>
Kendall French, Chairman		858-775-4474
<b>Mailing Address:</b>		
Five Moore Drive Street Name, Number	Durham City	NC 27709 State Zip Code
<b>Officer Name and Title:</b>		<b>Telephone:</b>
Michael Andy Divine, Treasurer		864-680-1656
<b>Mailing Address:</b>		
Five Moore Drive Street Name, Number	Durham City	NC 27709 State Zip Code
<b>Officer Name and Title:</b>		<b>Telephone:</b>
William Schuyler, Assistant Treasurer		202-715-1019
<b>Mailing Address:</b>		
1050 K Street, NW Street Name, Number	Washington City	DC 20001 State Zip Code
<b>Officer Name and Title:</b>		<b>Telephone:</b>
Sherry C. Smith		202-715-1019
<b>Mailing Address:</b>		
1050 K Street, NW Street Name, Number	Washington City	DC 20001 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).

<b>Name of Organization:</b>		<b>Telephone:</b>
GlaxoSmithKline LLC		202-715-1019
<b>Mailing Address:</b>		
Five Moore Drive Street Name, Number	Durham City	NC 27709 State Zip Code
<b>Name of Organization:</b>		<b>Telephone:</b>
<b>Mailing Address:</b>		
Street Name, Number	City	State Zip Code
<b>Name of Organization:</b>		<b>Telephone:</b>
<b>Mailing Address:</b>		
Street Name, Number	City	State Zip Code

**SUBMITTED BY:**

<b>X</b>	<b>Printed Name:</b> Sherry C. Smith	<b>Date:</b> 1/13/2016	<b>Telephone:</b> 2027151019
----------	-----------------------------------------	---------------------------	---------------------------------

Signature of Representative of Group