



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

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 NEVADA
 SECRETARY OF STATE
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 CARSON CITY NV
 #2395

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: **Battle Born Nevadan PAC** Telephone:

Mailing Address: **770 US Hwy 395 N** **Gardnerville** **NV 89410**
Street Name, Number City State Zip Code

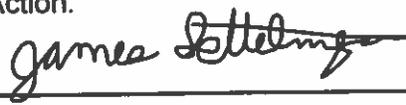
PAC Active Email Address: **James4Nevada@charter.net**

PURPOSE: Briefly state the purpose for which the PAC was organized.
 To advocate for or against concepts that would hinder or advance the prosperity of the silver state.

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: **James Settelmeyer** Telephone: **775-450-6114**
 Physical Address: **770 US Hwy 395 N** **Gardnerville** **NV 89410**
Street Name, Number City State Zip Code

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

X  Date: **01/11/2016**
 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: Telephone:
 James Settlemeyer Chairman 775-450-6114

Mailing Address: NV 89410
 770 US Hwy 395 N State Zip Code
 Street Name, Number City

Officer Name and Title: Telephone:

Mailing Address: State Zip Code
 Street Name, Number City

Officer Name and Title: Telephone:

Mailing Address: State Zip Code
 Street Name, Number City

Officer Name and Title: Telephone:

Mailing Address: State Zip Code
 Street Name, Number City

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: State Zip Code
 Street Name, Number City

Name of Organization: Telephone:

Mailing Address: State Zip Code
 Street Name, Number City

Name of Organization: Telephone:

Mailing Address: State Zip Code
 Street Name, Number City



SUBMITTED BY:
 James Settlemeyer Printed Name: James Settlemeyer
 Signature of Representative of Group Date: 01/11/2016
Telephone: 775-450-6114