



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**  
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**RECEIVED**

FEB 16 2016

SECRETARY OF STATE *llm*  
 ELECTIONS DIVISION

#2450

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       Change Address  
Previous Name of PAC
- Other:

Name of Committee:

Regulate Marijuana like Alcohol

Telephone:

Mailing Address:

2370 Champlain St. NW Suite 12

Washington

DC 20009

Street Name, Number

City

State Zip Code

PAC Active Email Address: zmauldin@mpp.org

**PURPOSE:** Briefly state the purpose for which the PAC was organized.  
 To support the initiative to tax and regulate marijuana like alcohol.

**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:

*Registered Agents Inc. - E0354042011-8*

Telephone:

*775-401-6800*

Physical Address:

401 Ryland St. Ste 200-A

Reno

NV 89502

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**

*Bill Hume*

Date:

*2/10/2016*

Signature of Registered Agent



**BARBARA K. CEGAUSKE**  
 Secretary of State  
 Elections Division  
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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: Robert D. Kampia, Director Telephone: (202)905-2019

Mailing Address: 2370 Champlain St. NW Suite 12 Washington DC 20009  
 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

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: Marijuana Policy Project Telephone: (202)462-5747

Mailing Address: 2370 Champlain St. Suite 12 Washington DC 20009  
 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 *Rob Kampia*  
 Signature of Representative of Group

Printed Name:  
 Robert D. Kampia

Date:  
 2/10/15

Telephone:  
 (202)905-2019