



ROSS MILLER
Secretary of State
Elections Division
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 01/14/2015 #2462

Office of the
 Secretary of State
Barbara K. Cegavske
 Barbara K. Cegavske
 Elections Division

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

Name of Committee: _____ Telephone: _____
 Recall Hambrick PAC 702-942-3291

Mailing Address: _____
 5841 E. Charleston Blvd., Ste. 230-226 LAS VEGAS NV 89142
 Street Name, Number City State Zip Code

PURPOSE: Briefly state the purpose for which the PAC was organized.
 Political Action Committee formed for the purpose of effecting a recall of Nevada State Assemblyman John Hambrick.

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: _____
 Chuck Muth 702-942-3291

Physical Address: _____
 5841 E. Charleston Blvd., Ste. 230-226 Las Vegas NV 89142
 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.


 Signature of Registered Agent

Date: 1/14/15



ROSS MILLER
 Secretary of State
 Elections Division
 101 North Carson Street, Suite 3
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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: _____
 A.J. Maimbourg - Director 702-366-9297

Mailing Address: _____
 461 Crocus Hill Street Las Vegas NV 89
 Street Name, Number City State Zip Code

Officer Name and Title: _____ Telephone: _____
 Kristopher Del Campo - Director 702-918-0560

Mailing Address: _____
 9540 Rancho Palmas Drive Las Vegas NV 89117
 Street Name, Number City State Zip Code

Officer Name and Title: _____ Telephone: _____
 Russ Martin - Director 702-228-3070

Mailing Address: _____
 908 Bower Basin Street Las Vegas NV 89144
 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: _____ Telephone: _____
 N/A

Mailing Address: _____
 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

SUBMITTER:

X

Printed Name:
 Chuck Muth

Date: ~~1/13/15~~ 1/14/15 Telephone: 702-942-3291

Signature of Representative of Group