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

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

JStokes
5/31/2016 #2527

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: check all that apply ☐ Change Officers ☐ Change Registered Agent ☒ Change Address

☐ Change Name _____ Previous Name of PAC

☒ Other: Amend Purpose & Telephone

Name of Committee: EMG PAC

Telephone: 702-823-4364

Mailing Address: P.O. Box 34814 (Street Name, Number) | Las Vegas (City) | NV (State) | 89133 (Zip Code)

PAC Active Email Address: emgpac@emgnv.com

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

The purpose of EMG PAC is to promote policies that benefit children, disabled persons, seniors and U.S. veterans.

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: EMG Registered Agent Services

Telephone: 702-823-4364

Physical Address: 2620 Regatta Dr. STE. 102 (Street Name, Number) | Las Vegas (City) | NV (State) | 89128 (Zip Code)

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

X _____
Signature of Registered Agent

Date: 5/23/16

EL400
Revised: 11-6-15

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State of Nevada
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Page 2

OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages if necessary).

Officer Name and Title: Andre' Haynes, President-Secretary-Treasurer-Director
Telephone: 702-823-4364
Mailing Address: P.O. Box 34814 (Street Name, Number) | Las Vegas (City) | NV (State) | 89133 (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:
Telephone:
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

SUBMITTED BY:

X
Signature of Representative of Group

Printed Name: Andre' Haynes
Date: 5/23/16
Telephone: 702-823-4364

EL400
Revised: 11-5-15

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☐ 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: Dissolve PAC

Name of Committee: Veterans Treatment Courts PAC
Telephone: 702-823-4364

Mailing Address:
2620 Regatta Dr. STE. 102 | Las Vegas | NV | 89128
Street Name, Number | City | State | Zip Code

PAC Active Email Address: emgpac@emgnv.com

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

Support bills in favor of Veterans Treatment Courts being managed by Justice and Municipal Courts in Nevada.

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: EMG Registered Agent Services
Telephone: 888-316-5EMG (5364)

Physical Address:
2620 Regatta Dr. STE. 102 | Las Vegas | NV | 89128
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 _____
Signature of Registered Agent

Date: 5/23/16

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OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages if necessary).

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Telephone: 702-823-4364
Mailing Address: 2620 Regatta Dr. STE. 102 | Las Vegas | NV | 89128
Street Name, Number | City | State | Zip Code

Officer Name and Title:
Telephone:
Mailing Address:
Street Name, Number | City | State | Zip Code

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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:
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

SUBMITTED BY:

X
Signature of Representative of Group

Printed Name: Andre' Haynes
Date: 5/23/16
Telephone: 888-316-5364

EL400
Revised: 11-6-15