



BARBARA K. CEGAUSKE  
 Secretary of State  
 Elections Division  
 101 North Carson Street, Suite 3  
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# 3548  
**RECEIVED**  
 MAR 07 2016 *dlm*  
 SECRETARY OF STATE  
 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(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: Nevada Federation for Children PAC      Telephone: 703-281-7540

Mailing Address: 1660 L St., NW Ste. 1000      Washington DC 20036  
Street Name, Number      City      State      Zip Code

PAC Active Email Address: [llisker@hdafec.com](mailto:llisker@hdafec.com)

**PURPOSE:** Briefly state the purpose for which the PAC was organized.  
 To support candidates and committees interested in education issues.

**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: Kevin Benson      Telephone: 775-461-3780

Physical Address: 2310 S. Carson St. #6      Carson City NV 89701  
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**       Date: 03/01/2016  
 Signature of Registered Agent



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**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).

**Officer Name and Title:** Telephone:  
 Greg Brock, Chairman 703-281-7540  
**Mailing Address:**  
 1660 L St., NW Ste. 1000 Washington DC 20036  
 Street Name, Number City State Zip Code

**Officer Name and Title:** Telephone:  
 Lisa Lisker, Treasurer 703-281-7540  
**Mailing Address:**  
 228 S. Washington St., Ste. 115 Alexandria VA 22314  
 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:  
 American Federation for Children Action Fund  
**Mailing Address:**  
 1660 L St., NW Ste. 1000 Washington DC 20036  
 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:**  
 Lisa Lisker, Treasurer

**Date:**  
 3/4/2016

**Telephone:**  
 703-281-7540