BARBARA K. CEGAVSKE
Secretary of State
Elections Division
101 North Carson Street, Suite 3
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01/22/2015 #637

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

State of Nevada
Committee for Political Action (PAC)
Registration Form
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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: check all that apply
☒ Change Officers ☐ Change Registered Agent ☐ Change Address
☐ Change Name
Previous Name of PAC
☐ Other:

Name of Committee: Nevada Optometric PAC
Telephone: 702 220 7444

Mailing Address: PO Box 3022 (Street Name, Number) Reno (City) NV (State) 89505 (Zip Code)

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

To support candidates who are supportive of issues important to Optometrists.

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: Gail Conkey
Telephone: 702 220 7444

Physical Address: 5985 Hidden Highlands (Street Name, Number) Reno (City) NV (State) 89502 (Zip Code)

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

X Gail C
Signature of Registered Agent

Date: January 22, 2015

EL400.01
Revised: 1-5-15

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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: Dr. Hilaire Pressley, President of the Nevada Optometric PAC
Telephone: 702 998 8080
Mailing Address: 6592 N Decatur Blvd #130 (Street Name, Number) Las Vegas (City) NV (State) 89131 (Zip Code)

Officer Name and Title: Gail Conkey, Secretary of the Nevada Optometric PAC
Telephone: 702 220 7444
Mailing Address: PO Box 3022 (Street Name, Number) Reno (City) NV (State) 89505 (Zip Code)

Officer Name and Title: Spencer Quinton, Co-Chair of the Nevada Optometric PAC
Telephone: 702 938 0320
Mailing Address: 305 N Pecos Rd, Ste A (Street Name, Number) Henderson (City) NV (State) 89074 (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: Nevada Optometric Association
Telephone: 702 220 7444
Mailing Address: PO Box 3022 (Street Name, Number) Reno (City) NV (State) 89505 (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: Gail Conkey
Date: January 22, 2015
Telephone: 702 220 7444

EL400.01
Revised: 1-5-15