



**BARBARA K. CEGAVSKE**  
Secretary of State  
Elections Division  
101 North Carson Street, Suite 3  
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Office of the  
Secretary of State

Barbara Cegavske  
Elections Division

**JStokes**

11/15/2016 #788

**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 \_\_\_\_\_  
Previous Name of PAC

Other: \_\_\_\_\_

Name of Committee: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Sunrise Healthcare System Good Government PAC Fund      702-731-8000

Mailing Address: \_\_\_\_\_  
3186 S. Maryland Parkway      Las Vegas      NV      89109  
Street Name, Number      City      State      Zip Code

PAC Active Email Address: Jeena.John@hcahealthcare.com

**PURPOSE:** Briefly state the purpose for which the PAC was organized.  
Political Action Committee established to foster and promote good government 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: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Phillip Baker      702-731-8000

Physical Address: \_\_\_\_\_  
3186 S. Maryland Pkwy      Las Vegas      NV      89109  
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.

\_\_\_\_\_ Date: 11.11.16  
Signature of Registered Agent



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**State of Nevada**  
**Committee for Political Action**  
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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: Telephone:  
Todd Sklamberg, Chairman 702-731-8000

Mailing Address:  
3186 S. Maryland Parkway Las Vegas NV 89109  
Street Name, Number City State Zip Code

Officer Name and Title: Telephone:  
Adam Rudd, PAC Officer 702-880-2100

Mailing Address:  
9300 W. Sunset Rd. Las Vegas NV 89148  
Street Name, Number City State Zip Code

Officer Name and Title: Telephone:  
Phillip Baker, PAC Registered Agent 702-731-8000

Mailing Address:  
3186 S. Maryland Parkway Las Vegas NV 89109  
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:  
Sunrise Hospital 702-731-8000

Mailing Address:  
3186 S. Maryland Parkway Las Vegas NV 89109  
Street Name, Number City State Zip Code

Name of Organization: Telephone:  
Mountain View Hospital 702-255-5000

Mailing Address:  
3100 N. Tenaya Way Las Vegas NV 89128  
Street Name, Number City State Zip Code

Name of Organization: Telephone:  
Southern Hills Hospital 702-880-2100

Mailing Address:  
9300 W. Sunset Rd. Las Vegas NV 89148  
Street Name, Number City State Zip Code

**SUBMITTED BY:**

**X**   
Signature of Representative of Group

Printed Name: Date:  
Phillip Baker 11-16-16

Telephone:  
702-731-8000