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ROSS MILLER
Secretary of State
Elections Division
101 North Carson Street, Suite 3
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Office of the
Secretary of State

Ross Miller
Elections Division

State of Nevada
Committee for Political Action
(PAC)
Registration Form
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JStokes
04/10/2012

#2220

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
 - Change Name
 - Other:

Name of Committee: School Improvement Committee Telephone: _____

Mailing Address: c/o PBTk, 6100 Elton Avenue, Suite 1000 Las Vegas NV 89107
 Street Name, Number City State Zip Code

PURPOSE: Briefly state the purpose for which the PAC was organized.
To advocate for the passage of a ballot question in support of capital projects for public schools.

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: Scott Taylor Telephone: 702-384-1120

Mailing Address: 6100 Elton Avenue, Suite 1000 Las Vegas NV 89107
 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: 4/10/2012



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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: _____

Sandy Miller, Chair

Mailing Address:

c/o PBTK, 6100 Elton Avenue, Suite 1000
Street Name, Number

Las Vegas
City

NV 89107
State Zip Code

Officer Name and Title: _____

Bonnie Bryan, Member

Mailing Address:

c/o PBTK, 6100 Elton Avenue, Suite 1000
Street Name, Number

Las Vegas
City

NV 89017
State Zip Code

Officer Name and Title: _____

Dema Guinn, Member

Mailing Address:

c/o PBTK, 6100 Elton Avenue, Suite 1000
Street Name, Number

Las Vegas
City

NV 89107
State Zip Code

Officer Name and Title: _____

Dawn Gibbons, Member

Mailing Address:

c/o PBTK, 6100 Elton Avenue, Suite 1000
Street Name, Number

Las Vegas
City

NV 89107
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

Sandy Miller

Date: 4/10/12

Telephone: 458-2558

Signature of Representative or Group