

# Committee for Political Action (PAC) Registration Form

FILE  
MAR 09 2004  
DEAN HELLER Nevada  
SECRETARY OF STATE  
#669

Print or type the following information; complete both sides of this registration form:

**REGISTRATION:** (check one)  New registration  Amended registration (if amended list reason)

**REASON FOR AMENDMENT:**  Change in officers  Change resident agent  
 Other \_\_\_\_\_

**NAME OF COMMITTEE:** Committee for Truth In Politics

**Mailing Address:** 3395 S. Jones Blvd. #270  
Las Vegas, NV 89146  
City State Zip

**Telephone Number:** 702-596-6757 **Facsimile Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Website Address:** \_\_\_\_\_

**PURPOSE:** (Briefly state the purpose for which the political action committee was organized.)  
To disseminate truth in political campaigns

**RESIDENT AGENT:** (Pursuant to NRS 294A.260, each committee for political action must appoint and keep in this state a resident agent who must be a natural person who resides in the State of Nevada.)

**Name of Resident Agent:** Doug Roundy

**Mailing Address:** 3395 S. Jones Blvd. #270  
Las Vegas, NV 89146  
City State Zip

**Telephone Number:** 702-596-6757 **Facsimile Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Website Address:** \_\_\_\_\_

## ACCEPTANCE OF APPOINTMENT BY RESIDENT AGENT

I, Doug Roundy, hereby accept appointment as Resident Agent for the above named committee for political action.

  
Signature of Resident Agent

3/1/04 1105  
Date

**OFFICERS:** (Please list the name, title and address of each officer.)

<u>Paul Roundy</u>	<u>3395 S. Jones Blvd. #270</u>
<b>Name</b>	<b>Address</b>
<u>Secretary</u>	<u>Las Vegas, NV 89146</u>
<b>Title</b>	<b>City/State/Zip</b>
_____	_____
<b>Name</b>	<b>Address</b>
_____	_____
<b>Title</b>	<b>City/State/Zip</b>
_____	_____
<b>Name</b>	<b>Address</b>
_____	_____
<b>Title</b>	<b>City/State/Zip</b>
_____	_____
<b>Name</b>	<b>Address</b>
_____	_____
<b>Title</b>	<b>City/State/Zip</b>
_____	_____

**AFFILIATION:** (If the committee for political action is affiliated with any other organizations, list the name and address of each organization.)

<b>Name of Organization:</b>	<b>Address:</b>
<u>N/A</u>	_____
<u>N/A</u>	_____
<u>N/A</u>	_____

**Submitted By:**

<u>Committee for Truth In Politics</u>	<u>3/1/04</u>
<u>Doug Roundy</u>	_____
_____	<b>Date</b>
<b>Name of representative of group</b>	

**Send Completed Form to:**  
**SECRETARY OF STATE**  
**101 NORTH CARSON STREET #3**  
**CARSON CITY, NEVADA 89701-4786**  
**PHONE: (775) 684-5705 FAX: (775) 684-5718**