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ROSS MILLER
Secretary of State
Elections Division
101 North Carson Street, Suite 3
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SECRETARY OF STATE
ELECTIONS DIVISION
#1743

**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(3)(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: _____
National Federation of Independent Business/Nevada's Save America's Free Enterprise Trust 202-554-9000

Mailing Address: _____
1201 F St. NW Suite 200 Washington DC 20004
Street Name, Number City State Zip Code

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

Support candidates who are effective advocates of small business and oppose candidates who are not effective advocates of small business.

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: _____
Randi Thompson 775-830-8407

Physical Address: _____
140 Washington St. #150 Reno NV 89503
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.

Randi Thompson
Signature of Registered Agent

Date:
05/13/2014



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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:
Michael Maloney, Treasurer	202-314-2058

Mailing Address:			
1201 F. St. NW Suite 200	Washington	DC	20004
Street Name, Number	City	State	Zip Code

Officer Name and Title:	Telephone:
Eugene Hoover, Chair	775-331-1132

Mailing Address:			
P.O. Box 11795	Reno	NV	89510
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:
National Federation of Independent Business	

Mailing Address:			
1201 F. St. NV #200	Washington	DC	20004
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:

Printed Name:	Date:	Telephone:
 Randi Thompson	05/13/2014	775-830-8407

Signature of Representative of Group