WFA 13

ROSS MILLER
Secretary of State
Elections Division
101 North Carson Street, Suite 3
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Phone: (775) 684-5705
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Office of the Secretary of State
Ross Miller
Elections Division

JStokes
09/18/2012

#2276

State of Nevada
Committee for Political Action (PAC)
Registration Form
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ABOVE SPACE IS FOR OFFICE USE ONLY

[X] 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: WORKING FAMILIES FOR ASSEMBLY 13 Telephone: 702-596-1482

Mailing Address: 1891 WHITNEY MESA (Street Name, Number) HENDERSON (City) NV (State) 89014 (Zip Code)

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

To elect candidates to Assembly 13 that support working families and their issues.

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: BEVERLY SALHANICK, ESQ. Telephone: 702-227-0787

Mailing Address: 2001 S. JONES, SUITE I (Street Name, Number) LAS VEGAS (City) NV (State) 89146 (Zip Code)

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

X [signature] Date: 9/13/12
Signature of Registered Agent

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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: GAIL TUZZOLO - DIRECTOR
Telephone: 702-596-1482
Mailing Address: 9213 PITCHING WEDGE
Street Name, Number: 9213 PITCHING WEDGE
City: LAS VEGAS
State: NV
Zip Code: 89134

Officer Name and Title: RANDY SOLTERO - TREASURER
Telephone: 702-429-5093
Mailing Address: 2215 MERANO COURT
Street Name, Number: 2215 MERANO COURT
City: LAS VEGAS
State: NV
Zip Code: 89123

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:
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
Signature of Representative of Group

Date: 9-17-2012

Telephone: 702-596-1482

EL400.01
Revised: 11-16-11