

BARBARA K. CEGAVSKE Secretary of State Elections Division 101 North Carson Street, Suite 3 Carson City, Nevada 89701-3714 Phone: (775) 684-5705

Fax: (775) 684-5718 Website: www.nvsos.gov

State of Nevada Committee for Political Action (PAC)

Registration Form

Office of the Secretary of State

Barlina Ceganske

Barbara Cegavske Elections Division

JStokes

8/01/2017 #2504

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			VE SPACE IS FOR OFFICE USE ONLY
New Registration	PAC (Advocating Page 1)	assage or Defeat of a Ballot Que	estion)
Annual (Due on or before	January 15th of <u>each</u> year	; NRS 294A.230(4)(b))	
Amended Registration: check all that apply	Change Officers	Change Registered Agent	Change Address
check all that apply	Change Name RIP		
	Other:	ous Name of PAC	
Name of Committee:	Other.		Telephone:
Repeal the Commerce Tax, Inc.			
Mailing Address:			
1009 SPENCER ST.	Cars	son City	NV 89703
Street Name, Number	City		State Zip Code
PAC Active Email Address: ro	onknecht@aol.com		
To a file a Referendum on provis and any activities related thereto.		Tax from Senate Bill No. 483 of the	e 2015 Legislative Session,
		ch PAC must appoint and keep in I person who resides in the State	
Name of Registered Agent:			Telephone:
Ronald L. Knecht			775-882-2935
Physical Address:			
1009 SPENCER ST.	Cars	son City	NV 89703
Street Name, Number	City		State Zip Code
REGISTERED AGENT ACCE Committee for Political Action.	PTANCE: I hereby accept	t appointment as Registered Age	ent for the above-named
X Remala X X X Signature of Registered Agent	esty	Date: 1 08101/17	

EL400 Revised: 11-5-15



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(PAC)
Registration Form

State of Nevada

Committee for Political Action

OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages if

necessary). Officer Name and Title:		Telephone:	
Ronald L. Knecht, President			
Mailing Address:			
1009 SPENCER ST.	Carson City	NV 89703	
Street Name, Number	City	State Zip Code	
Officer Name and Title:			
Robert T. Beers, Secretary/Treasurer		702-592-8822	
Mailing Address:		Harris Commence and Commence	
9428 Grenville Ave.	Las Vegas	NV 89134	
Street Name, Number	City	State Zip Code	
Officer Name and Title:		Telephone:	
Mailing Address:		н	
Street Name, Number	City	State Zip Code	
Officer Name and Title:		Telephone:	
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Mailing Address:			
Mailing Address:			
Street Name, Number AFFILIATIONS: If the PAC is affiliated		State Zip Code name, address and telephone nu	
Street Name, Number AFFILIATIONS: If the PAC is affiliated	d with any other organizations, list the		
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