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State of Nevada Committee Registration Form

Use this form to register or make changes to a:

- Committee for Political Action (PAC)
- Committee for Political Action (PAC) Advocating Passage or Defeat of a Ballot Question
- Committee Sponsored by a Political Party
- Recall Committee

Select Committee Type					
☐ Committee for Political Action (PAC)	Committee Spo	nsored by a Political Party	Recall Committee		
Committee for Political Action (PAC) Advocating Passage					
Action Requested (select all that apply)					
■ New Registration □ PAC Annual Registration (Due on or before January 15 th of each year – NRS 294A.230(4)(b))					
Amended Registration (check all that apply):					
☐ Change Officers ☐ Change Registered Agent ☐ Change Address ☐ Reactivation					
☐ Change Name (previous name of Comm	ittee)				
Other				-	
				-	
Name of Committee					
Nevada Voters First					
Mailing Address	City		State	ZIP Code	
400 South 7th Street, Suite 300	Las Veg	as	NV	89101	
Email Address			Telephone Number		
tlb@pisanellibice.com			(702) 214-2100		
PUPROSE: Briefly state the purpose for which the Committee was organized.					
Initiative Petition - Better Voting Nevada Initiative					
Name of Public Officer to be Recalled (Include title of office held) *This section only applies to a Recall Committee*					
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. *Recall Committees only need a Registered Agent if it is an organization locoted outside the State.*					
Name of Registered Agent		Email Address		Telephone Number	
Todd L. Bice	tlb@pisanellibice.com		(702) 214-2	100	
Physical Address	City		State	ZIP Code	
400 South 7th Street, Suite 300	Las Veg	as	NV	89101	
REGISTERED AGENT ACCEPTANCE: I hereby accept appointment as Registered Agent for the above-named Committee.					
1 / / / / /		For Office Use Only			
Signature of Registered Agent		Office of the Secretary of State	KRhynes	7	
11-12-21			11/12/21 #9064		
Date		Barliana Ceganske	11/12/21 #9004	<u>'</u>	
		Barbara Cegavske Elections Division			

EL400

Revised: 02-05-2019

OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages, if necessary). Officer Name and Title Telephone Number Todd L. Bice, President (702) 214-2100 **Mailing Address** City State ZIP Code 400 South 7th Street, Suite 300 Las Vegas NV 89101 Officer Name and Title Telephone Number **Mailing Address** City **ZIP Code** State Officer Name and Title Telephone Number Mailing Address City State ZIP Code Officer Name and Title Telephone Number **Mailing Address** City State **ZIP Code** AFFILIATIONS: If the PAC is affiliated with any other organizations, list the name, address and telephone number of each organization (attach additional pages, if necessary). *Political Party Committees and Recall Committees may skip this section.* Telephone Number Name of Organization **Mailing Address** City ZIP Code State Name of Organization Telephone Number **Mailing Address** City State ZIP Code SUBMITTED BY: (702) 214-2100 Todd L. Bice **Telephone Number** Printed Name 11/12/2021 Date Signature