



FRANCISCO V. AGUILAR
 Secretary of State
 101 North Carson Street, Suite 3
 Carson City, Nevada 89701
 (775) 684-5705
 Facsimile: (775) 684-5718
 Email: nvelect@sos.nv.gov
 Website: www.nvsos.gov

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 Sponsored 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 15th 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 Committee)

Committee to Recall Sara Schmitz

Other

Name of Committee

The Committee to Recall IVGID Trustee Sara Schmitz

Mailing Address PO Box 5663	City Incline Village	State NV	ZIP Code 89450
--------------------------------	-------------------------	-------------	-------------------

Email Address tim2tahoe@msn.com	Telephone Number 775-336-9925
------------------------------------	----------------------------------

PURPOSE: Briefly state the purpose for which the Committee was organized.
 To recall IVGID Trustee Sara Schmitz

Name of Public Officer to be Recalled (Include title of office held) *This section only applies to a Recall Committee*
 Sara Schmitz

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 located outside the State.

Name of Registered Agent	Email Address	Telephone Number	
Physical Address	City	State	ZIP Code

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

For Office Use Only

Signature of Registered Agent

Date

Office of the
 Secretary of State

FVAguilar

Francisco V. Aguilar

NJWoodson

7/14/23 #11252

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

Officer Name and Title Tim Callicrate -Director		Telephone Number 775-336-9925	
Mailing Address PO Box 5663	City Incline Village	State NV	ZIP Code 89450
Officer Name and Title Mary Kleingartner -Director		Telephone Number 206-604-1200	
Mailing Address PO Box 4464	City Incline Village	State NV	ZIP Code 89450
Officer Name and Title Tia White -Director		Telephone Number 775-287-7544	
Mailing Address 172 Tramway	City Incline Village	State NV	ZIP Code 89451
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.

Name of Organization		Telephone Number	
Mailing Address	City	State	ZIP Code
Name of Organization		Telephone Number	
Mailing Address	City	State	ZIP Code

SUBMITTED BY:

Tim Callicrate

 Printed Name


 Signature

775-336-9925

 Telephone Number
 July 14, 2023

 Date