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FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZ	ZATION		
1 Ottown 1	(See instruct	tions)		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Silver State 21	st Century PAC			
سسسسا				
ADDRESS (number and s	treet) 3069 Conquista Ct			
(Check if address				
is changed)	Las Vegas			89121
		CITY	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one	e-mail address)		
(Check if address is changed)	rlg5@cox.net			
is onangos,				
(Check if address is changed)	PAGE ADDRESS (URL)			
2. DATE 0 3	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICATION	TION NUMBER	C C00364901		
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A	A)	
I certify that I have examin	ned this Statement and to the best of my k	nowledge and belief it is true, core	rect and complete	
Type or Print Name of ⁻	Treasurer Martin S Loeb			
Signature of Treasurer	Electronically Filed by Martin S	S Loeb	Date 10	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fals	se, erroneous, or incomplete information n	nay subject the person signing thi		
Office Use Only		For further informated Federal Election Control Free 800-424-9	mmission	FEC FORM 1 (Revised 02/2009)

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	COMMITTEE (Check One) Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
Name of Candidate		
Candidate Party Affili		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Con		
(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
Political A	action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
	Corporation Corporation w/o Capital Stock La	abor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) X	The state of the s	ed fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	X In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	ш	
	raising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Co	ommittees Participating in Joint Fundraiser	
	1. FEC ID number C	
	2. FEC ID number	
	3. FEC ID number C	
	4 FEC ID number C	

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Write or Type Committee Name				
Silver State 21st Centur	y PAC			
6. Name of Any Connected Org	ganization, Affiliated Committee,	Joint Fundraising Representati	ve, or Lead	dership PAC Sponsor
Shelley Berkley				
	1 1 1 1 1 1 1 1 1 1 1			
Mailing Address	3069 Conquista	Court		
	Las Vegas		YV] [89121 <u> </u>
	CITY	ST	ATE 🛕	ZIP CODE ▲
Relationship:				
Connected Organization	Affiliated Committee	Joint Fundraising Represe	ntative	X Leadership PAC Sponsor
possession of Committee	entify by name, address, (phon books and records. Goldberg 3069 Conquista			
	Las Vegas		NV_	89121 _
Title or Position ♥ Custidian	CITY A	ST Telephone number	ATE & 	ZIP CODE 14 734 2887
name and address of any	and address (phone number designated agent (e.g., assist		the comm	nittee; and the
Mailing Address	3069 Conquista	ı Ct.		
	Las Vegas		NV	<u>89121</u> _
Title or Position ♥	CITY 🛦	ST	ATE	ZIP CODE A
Treasurer		Telephone number	702	734 2887

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Full Name of Designated Agent	_	Linda l	L. Goldbe	rg								
Mailing Addres	SS .		3069 C	onquist	a Ct.							
		Las Vegas						NV8912			1	
Title or Position ▼		CITY A			STATE A			ZIP CODE A				
1	Deputy Tre	asurer			-		Telephor	ne numbe	702	734		2887
9. Banks or Other safety deposit bo Name of Bank, D	xes or mainta	ins funds.	II banks or ot	her depos	sitories i	n which	the comi	mittee de	posits funds, h	olds accour	nts, rents	
	Bank	of Nevada	a									
Mailing Address		P. O.	Box 26237	7								
		Las V	egas	<u> </u>		1 1	1 1 1		ŅV	891	95 _	
				CITY	4				STATE 4	ZII	CODE	A
Name of Bank, D	Depository, etc).										
							1 1 1					
Mailing Address												
											-	
				CITY	4	- 1			STATE 4	ZII	CODE	A