

For help completing Form 1, please double-click the

icon next to each line number.

10 MAY 5 PM 1:31

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF
COMMITTEE (in full)☐(Check if name
is changed)Example: If typing, type
over the lines.

12FE4M5

GARY BERNSTEIN FOR NEVADA, LLC

ADDRESS (number and street)

4711 SOUTH DURANGO DRIVE

☐(Check if address
is changed)

LAS VEGAS

NV

89147

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

GARY@GARYBERNSTEINNOW.COM

☐(Check if address
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.GARYBERNSTEINNOW.COM

☐(Check if address
is changed)

2. DATE

04 / 30 / 2010

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

THOMAS R. HORST

Signature of Treasurer



Date

04 / 30 / 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 02/2009)

10020350413

5. TYPE OF COMMITTEE

Candidate 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 the candidate information below.)

Name of Candidate

GARY ALAN BERNSTEIN

Candidate Party Affiliation

REP

Office Sought:

☐

House

☒

Senate

☐

President

State

NV

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- | | | |
|--|--|---|
| ☐ Corporation | ☐ Corporation w/o Capital Stock | ☐ Labor Organization |
| ☐ Membership Organization | ☐ Trade Association | ☐ Cooperative |
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

- | | | | |
|----|--------------------------|---------------|---|
| 1. | ☐ | FEC ID number | C |
| 2. | ☐ | FEC ID number | C |
| 3. | ☐ | FEC ID number | C |
| 4. | ☐ | FEC ID number | C |

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Write or Type Committee Name

GARY BERNSTEIN FOR NEVADA, LLC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

THOMAS R. HORST

Mailing Address

2799 EAST TROPICANA AVENUE

SUITE H

LAS VEGAS

NV

89121

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

702 - 454 - 7899

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

THOMAS R. HORST

Mailing Address

2799 EAST TROPICANA AVENUE

SUITE H

LAS VEGAS

NV

89121

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

702 - 454 - 7899

10020350415

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

CITY

STATE

ZIP CODE

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

JP MORGAN CHASE BANK, N.A.

Mailing Address

75 SOUTH VALLE VERDE DRIVE

HENDERSON

NV

89014

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

To print and file this form, select "Print" from the "File" menu above. In the "Print" window, select "Document" from the drop down menu labeled "Comments and Forms" Doing so will ensure that the icons and other instructions will not appear on your filing. Click here for a video printing demonstration.

10020350416

Senate
ce

INSPECTION

United States Customs
Post Office

FedEx

Post Office
MON - 03 MAY 92
PRIORITY OVERNIGHT



52
FedEx® US Airbill

Express Tracking Number 8630 5291 5674

1 From This portion can be removed for Recipient's records.

Date FRI MAY 30 1992 FedEx Tracking Number 863052915674

Sender's Name NAME 30 JUN 92 4 54 PM Phone 702 478-6004

Company DALE, BROWN & ASSY AT LAW

Address 605 N 4TH ST

City LAS VEGAS State NV ZIP 89101-7004

2 Your Internal Billing Reference

GRAY KERNSTEIN FULNOMAN

3 To Recipient's Name Secretary of the Senate Phone 202 634-1100

Company OFFICE OF PUBLIC RELATIONS

Address 232 HART SENATE OFFICE BUILDING

City WASHINGTON State D.C. ZIP 20510-7116

0368696402



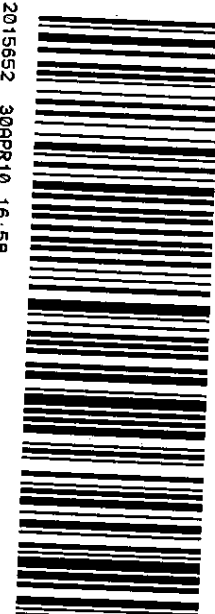
8630 5291 5674

TR# 8630 5291 5674

SA YKNA

20510
DC-US
DCA

emp# 2015652 30APR10 16:58



4a Express Package Service

☒ FedEx Priority Overnight
Next business day, Monday through Friday. Shipments will be delivered on Monday unless SATURDAY Delivery is selected.

☐ FedEx 2Day
Second business day, Tuesday through Thursday. Shipments will be delivered on Monday unless SATURDAY Delivery is selected.

4b Express Freight Service

☐ FedEx 1Day Freight
Next business day, Monday through Friday. Shipments will be delivered on Monday unless SATURDAY Delivery is selected.

5 Packaging

☒ FedEx Envelope
☐ FedEx Pak
☐ FedEx Small Pak
☐ FedEx Box
☐ FedEx Tube
☐ Other

6 Special Handling

☐ SATURDAY Delivery
Not available for FedEx Priority Overnight, Express Saver, or FedEx 2Day Freight. Does this shipment contain dangerous goods? ☐ Yes ☒ No

7 Payment

☒ Pay to order
☐ Pay to order
☐ Pay to order
☐ Pay to order

8 Re-antial Delivery Signature Options

☐ No Signature Required
☐ Direct Signature
☐ Indirect Signature

21705302001

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	05-30-10	☒
UPS	_____	☐
DHL	_____	☐
AIRBORNE EXPRESS	_____	☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

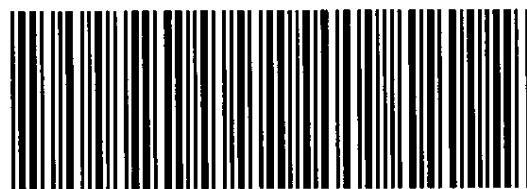
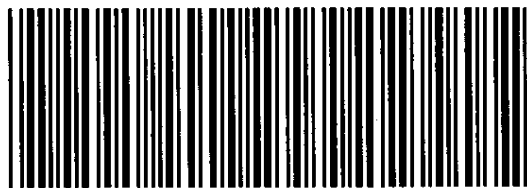
POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 05-05-10

10020350418



10020350419