



CITY OF PEORIA
POLITICAL COMMITTEE
STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(officer use only)

- Initial Application
Amended Application
Date:

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): (first or last name and office)

Candidate Information:

Candidate's Name (required):
Candidate's mailing address (required):
Candidate's email address (required):
Candidate's phone number (required):
Candidate's website (if any):

- Office Sought (choose one): Mayor, Acacia District Councilmember, Ironwood District Councilmember, Mesquite District Councilmember, Palo Verde District Councilmember, Pine District Councilmember, Willow District Councilmember

Election Cycle for Office Sought (year the election will take place) (required):

Political Action Committee (PAC)

Committee Name (required): (if sponsored, must include sponsor's name)

Political Function (optional) (select all that apply):

- Contributions, Candidate-Related Independent Expenditures, Ballot Measure Expenditures, Recall Expenditures

Sponsorship Information (if applicable):

Sponsor's name or nickname (required):
Sponsor's mailing address (required):
Sponsor's email address (required):
Sponsor's phone number (if any):
Sponsor's website (if any):

Special Status (if applicable): Separate Segregated Fund of a Corporation, LLC, Partnership, or Union



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COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required):
Committee's email address (required):
Committee's phone number (if any):
Committee's website (if any):

Chairperson's Information:

Chairperson's name (required):
Chairperson's physical address (required):
Chairperson's mailing address (if different):
Chairperson's email address (required):
Chairperson's phone number (required):
Chairperson's employer (required):
Chairperson's occupation (required):

Treasurer's Information:

Treasurer's name (required):
Treasurer's physical address (required):
Treasurer's mailing address (if different):
Treasurer's email address (required):
Treasurer's phone number (required):
Treasurer's employer (required):
Treasurer's occupation (required):

Bank or Financial Institution (do not list acct numbers):

Bank name (required):
Additional bank name (if applicable):
Additional bank name (if applicable):

DECLARATION AND SIGNATURES:

I declare under penalty of perjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as chairperson or treasurer of the committee named herein, if applicable; (2) designate the above-named committee as my official candidate committee and authorize it to receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's campaign finance and reporting guide; (4) agree to comply with Arizona election law, including campaign finance laws codified at A.R.S. §§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of process for campaign finance purposes via the email address(es) provided herein.

Chairperson's signature: Date:

Treasurer's signature: Date:

Candidate's signature (if applicable): Date: