



**CITY OF TUCSON
OFFICE OF THE CITY CLERK
CAMPAIGN FINANCE ADMINISTRATION REPORT**

RECEIPT

NAME OF CANDIDATE FILING REPORT

For Las Adelitas Arizona
(Name of Political Committee)
for _____ who is a candidate for the office
(Name of Candidate, when applicable)
of _____ Political Party _____ ID # 09-160-CT

OR

CANDIDATE \$500 THRESHOLD EXCEPTION STATEMENT

for _____
(Name of Candidate)
who is a Candidate for the Office of _____
Political Party _____ Contract # _____

Political Committee Statement of Organization # 09-160-CT Original or
 Amended

CAMPAIGN FINANCE REPORT:

- State Campaign Finance Report (Filed on or before January 31, 2011)
- State Campaign Finance Report (Filed on or before June 30, 2011)
- State Pre-Primary Election Report (Filed on or before August 18, 2011)
- State Post-Primary Election Report (Filed on or before September 29, 2011)
- State Pre-General Election Report (Filed on or before October 27, 2011)
- State Post-General Election Report (Filed on or before December 8, 2011)
- Political Committee No Activity Statement (Report date of: _____)
- Termination Statement (Final report must be included if not previously filed)
- Other _____

OFFICE OF THE
CITY CLERK

11 MAY 20 11:49

CITY OF TUCSON
RECEIVED

[Signature]
Signature Deputy City Clerk

5/20/11
Date

[Signature]



**CITY OF TUCSON
POLITICAL COMMITTEE
STATEMENT OF ORGANIZATION**
Titles 16 & 19, Arizona Revised Statutes

"For Official Use Only"
Amended to reflect change
in committee chairperson and
Pursuant to A.R.S. §16-902.01 (F)
telephone number

Definitions, statutory references and important information on reverse.

Initial Registration
 Out of State Committee
 Amended Statement

ID# 09-160-CT

Registration as Standing Political Committee

NAME OF POLITICAL COMMITTEE Las Adelitas Arizona PAC		DATE 5/20/11	
ADDRESS (NUMBER & STREET) PO Box 27716		CITY Tucson	STATE ZIP AZ 85726
MAILING ADDRESS (if different from above)		CITY	STATE ZIP
COMMITTEE TELEPHONE # (520) 975-1485	COMMITTEE FAX #	COMMITTEE E-MAIL ADDRESS lasadelitasarizona@gmail.com	
DOES THE POLITICAL COMMITTEE HAVE A SPONSORING ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, please provide the following information:			
NAME OF SPONSORING ORGANIZATION		TYPE OF ORGANIZATION	
ADDRESS OF SPONSORING ORGANIZATION		RELATIONSHIP TO POLITICAL COMMITTEE	
TYPE OF POLITICAL COMMITTEE – Please check only <u>one</u> box: <input type="checkbox"/> CANDIDATE'S CAMPAIGN COMMITTEE <input type="checkbox"/> EXPLORATORY COMMITTEE <input checked="" type="checkbox"/> COMMITTEE ORGANIZED IN SUPPORT OF OR OPPOSITION TO ONE OR MORE CANDIDATES <input type="checkbox"/> COMMITTEE IN SUPPORT OF OR OPPOSITION TO THE QUALIFICATION, PASSAGE OR DEFEAT OF A BALLOT ISSUE <input type="checkbox"/> COMMITTEE ORGANIZED TO CIRCULATE OR OPPOSE A RECALL PETITION OR TO INFLUENCE THE RESULT OF A RECALL ELECTION <input type="checkbox"/> OTHER COMMITTEE: (please describe below) _____ *Petition Serial Number _____ Supports <input type="checkbox"/> Opposes <input type="checkbox"/>			
<input type="checkbox"/> STANDING POLITICAL COMMITTEE (\$250 annual fee required) (A.R.S. § 16-902.01) By selecting the above classification, the committee declares that it has been active in more than one reporting jurisdiction in this state for more than one year AND is one of the following: (please check ONE of the following boxes below) <input type="checkbox"/> SEPARATE SEGREGATED FUND ESTABLISHED BY A CORPORATION OR LABOR ORGANIZATION <input type="checkbox"/> COMMITTEE ORGANIZED FOR THE PURPOSE OF MAKING INDEPENDENT EXPENDITURES <input type="checkbox"/> POLITICAL ORGANIZATION (an organization that is formally affiliated with and recognized by a political party including district committee that is organized pursuant to A.R.S. § 16-823) <input type="checkbox"/> POLITICAL PARTY (only state or county committees of an organization that meets the requirements for recognition as a political party (A.R.S. § 16-801, § 16-804, § 16-821 and § 16-825))			
EACH POLITICAL COMMITTEE SHALL HAVE A CHAIRMAN AND TREASURER. THE POSITION OF CHAIRMAN AND TREASURER OF A SINGLE POLITICAL COMMITTEE MAY NOT BE HELD BY THE SAME INDIVIDUAL, EXCEPT THAT A CANDIDATE MAY BE CHAIRMAN AND TREASURER OF HIS OR HER OWN CAMPAIGN COMMITTEE. A.R.S. § 16-902(A).			
NAME OF COMMITTEE CHAIRMAN Deyanira Nevarez		CHAIRMAN'S TELEPHONE # (520) 975-1485	CHAIRMAN'S FAX #
CHAIRMAN'S ADDRESS PO Box 27716		CITY Tucson	STATE ZIP AZ 85726
CHAIRMAN'S OCCUPATION Program Director		CHAIRMAN'S EMPLOYER Save Ethnic Studies	
NAME OF COMMITTEE TREASURER Nora Evans-Reitz		TREASURER'S TELEPHONE # (520) 975-1485	TREASURER'S FAX #
TREASURER'S ADDRESS PO Box 27716		CITY Tucson	STATE ZIP AZ 85726
TREASURER'S OCCUPATION none		TREASURER'S EMPLOYER none	

*If committee is formed on ballot proposition, indicate petition serial number and whether the committee supports or opposes the proposition.

