

Initial Application  
 Amended Application  
Date: 1/16/19



### City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)  
19-296-CY

**COMMITTEE TYPE** (choose one):

**Candidate**

Committee Name (required): Cunningham for Council Ward 2  
(first or last name & office)

Candidate Information: Candidate's Name (required): Paul Cunningham  
Candidate's mailing address (required): 7012 E. 3rd St. Tucson, AZ 85710  
Candidate's email address (required): TucsonCunningham@yahoo.com  
Candidate's phone number (required): 520-955-4302  
Candidate's website (if any): \_\_\_\_\_

Office Sought (choose one):  Mayor  Council Member, Ward 2

Election Cycle for Office Sought (year the election will take place) (required): 2019

Party Affiliation: (required)  Democrat  Libertarian  Republican  Other: \_\_\_\_\_

**Political Action Committee (PAC)**

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

Political Function (optional): (select any 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 must be filed with Secretary of State (if applicable)  Separate Segregated Fund of a Corporation, LLC, Partnership, or Union  
 Standing Committee (must also complete separate standing committee registration)  
 Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)

**Political Party**

Committee Name (required): \_\_\_\_\_  
(must include party affiliation)

Jurisdiction:  State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)  
 County Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)  
 Legislative District Party (must include proof of organization pursuant to A.R.S. § 16-823)  
 City or Town Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)

Special Status must be filed with Secretary of State (if applicable)  Standing Committee (must also complete separate standing committee registration)

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**City of Tucson  
 COMMITTEE STATEMENT  
 OF ORGANIZATION**

COMMITTEE ID NUMBER  
 (office use only)  
19-296-CT

**COMMITTEE INFORMATION:**

**Contact Information:** Committee's mailing address (required): 4500 E Speedway #41, Tucson AZ 85712  
 Committee's email address (required): CUNNINGHAMFORTUCSON@GMAIL.COM  
 Committee's phone number (if any): \_\_\_\_\_  
 Committee's website (if any): \_\_\_\_\_

**Chairperson's Information:** Chairperson's name (required): Rachael Eggebeen  
 Chairperson's physical address (required): 9930 E Colette St Tucson, AZ 85748  
 Chairperson's mailing address (if different): 4500 E SPEEDWAY #4 TUCSON, AZ 85712  
 Chairperson's email address (required): reeggebeen@gmail.com  
 Chairperson's phone number (required): 520-777-5804  
 Chairperson's employer (required): Sunnyside Unified School District  
 Chairperson's occupation (required): Teacher

**Treasurer's Information:** Treasurer's name (required): REBECCA WICKER  
 Treasurer's physical address (required): 4500 E SPEEDWAY #4 TUCSON, AZ 85712  
 Treasurer's mailing address (if different): Same  
 Treasurer's email address (required): BECCAWICKER@gmail.com  
 Treasurer's phone number (required): (520) 310-1619  
 Treasurer's employer (required): Dedicated Gluten Free  
 Treasurer's occupation (required): Business Owner

**Bank or Financial Institution:** Bank name (required): Wells Fargo  
 (do not list acct numbers) 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: 1/15/19

Treasurer's signature: \_\_\_\_\_ Date: 1/15/19

Candidate's signature (if applicable): flay Date: 1/15/19