

Initial Application  
 Amended Application  
 Date: \_\_\_\_\_



**City of Tucson  
 COMMITTEE STATEMENT  
 OF ORGANIZATION**

COMMITTEE ID NUMBER  
 (office use only)  
 17-264-CT

**COMMITTEE TYPE** (choose one):

**Candidate**

*Committee Name* (required): \_\_\_\_\_  
 (first or last name & 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): \_\_\_\_\_

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

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

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

**Political Action Committee (PAC)**

*Committee Name* (required): INVEST IN TUCSON 2017  
 (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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Date: \_\_\_\_\_



## City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)

17-264-CT SN

**COMMITTEE INFORMATION:**

*Contact Information:*

Committee's mailing address (required): 4500 E SPEEDWAY #41 - 85712  
 Committee's email address (required): INVESTINTUCSON2017@GMAIL.COM  
 Committee's phone number (if any): \_\_\_\_\_

*Chairperson's Information:*

Committee's website (if any): INVESTINTUCSON2017.com

Chairperson's name (required): <u>BRUCE BURKE</u>	<u>TOM WARNE</u>
Chairperson's physical address (required): <u>3849 E BROADWAY #298</u>	<u>6101 N St Andrews 85718</u>
Chairperson's mailing address (if different): _____	<u>70 W CUSHING ST - 85701</u>
Chairperson's email address (required): <u>BRUCE@BURKEPC.COM</u>	<u>JLINVESTMENTS@AOL.COM</u>
Chairperson's phone number (required): <u>520.622.3596</u>	<u>520.884.8843</u>
Chairperson's employer (required): <u>LAW OFFICE OF BRUCE BURKE</u>	<u>SELF</u>
Chairperson's occupation (required): <u>ATTORNEY</u>	<u>COMM. RE DEVELOPER</u>

*Treasurer's Information:*

Treasurer's name (required): REBECCA WICKER  
 Treasurer's physical address (required): 4500 E SPEEDWAY #41 - 85712  
 Treasurer's mailing address (if different): \_\_\_\_\_  
 Treasurer's email address (required): BECCAWICKER@GMAIL.COM  
 Treasurer's phone number (required): 520.310.1619  
 Treasurer's employer (required): SELF  
 Treasurer's occupation (required): BUSINESS OWNER

*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: 1/31/17

Treasurer's signature: \_\_\_\_\_ Date: 1/31/17

Candidate's signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

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