COMMITTEE TYPE (choose one):

☐ Candidate

Committee 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 □ 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): ____________________________
(If sponsored, must include sponsor’s name)

Political Function (optional): □ Contributions □ Candidate-Related Independent Expenditures
(select any that apply) □ Ballot Measure Expenditures □ Recall Expenditures

Sponsorship Information: 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
☐ 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
☐ Standing Committee (must also complete separate standing committee registration)
City of Tucson
COMMITTEE STATEMENT
OF ORGANIZATION

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):
Committee's website (if any):

Chairperson's Information:
Chairperson's name (required): BRUCE BURKE
Chairperson's physical address (required): 3849 E BROADWAY #2A - 85716
Chairperson's mailing address (if different):
Chairperson's email address (required): BRUCE@BURKEPC.COM
Chairperson's phone number (required): 520-622-3596
Chairperson's employer (required): LAW OFFICE OF BRUCE BURKE
Chairperson's occupation (required): ATTORNEY

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): BECCAWICKER01GMAIL.COM
Treasurer's phone number (required): 520-310-1619
Treasurer's employer (required): SELF
Treasurer's occupation (required): BUSINESS OWNER

Bank or Financial Institution:
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: [Signature]
Date: 1/3/17

Treasurer's signature: [Signature]
Date: 1/31/17

Candidate's signature (if applicable): [Signature]
Date: 

CITY OF TUCSON
OFFICE OF THE CITY CLERK

Revised: December 2016