☒ Initial Application
☐ Amended Application

Date: 4/7/17

City of Tucson
COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)
17-270-CT

COMMITTEE TYPE (choose one):

☒ Candidate

Committee Name (required): (first or last name & office) Michael Oatman For Tucson Ward 6

Candidate Information:
Candidate's Name (required): Michael Oatman
Candidate's mailing address (required): PO Box 304, Tucson, Arizona.
Candidate's email address (required): wardsix@MichaelOatman.net
Candidate's phone number (required): (520)302-5465
Candidate's website (if any): MichaelOatman.net

Office Sought (choose one): ☐ Mayor ☒ Council Member, Ward 6

Election Cycle for Office Sought (year the election will take place) (required): 2017

Party Affiliation: (required) ☐ Democrat ☐ Libertarian ☐ Republican ☒ Other: Green Party

☐ 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): _____

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OFFICE OF THE CITY CLERK

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: 4/7/17

City of Tucson
COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER (office use only)

17-270-CT

COMMITTEE INFORMATION:

Contact Information:	Committee's mailing address (required):	PO Box 304, Tucson, Arizona. 85702.
	Committee's email address (required):	wardsix@MichaelOatman.net
	Committee's phone number (if any):	(520) 302-5465
	Committee's website (if any):	MichaelOatman.net
Chairperson's Information:	Chairperson's name (required):	Mark Garza
	Chairperson's physical address (required):	2416 N Sonoita Pl, Tucson, AZ.
	Chairperson's mailing address (if different):	PO Box 304, Tucson, Arizona. 85702.
	Chairperson's email address (required):	mark@MichaelOatman.net
	Chairperson's phone number (required):	(520) 302-5465
	Chairperson's employer (required):	Garza Enterprises
	Chairperson's occupation (required):	General Contractor
Treasurer's Information:	Treasurer's name (required):	Michael Oatman
	Treasurer's physical address (required):	2731 N Fair Oaks Ave, Tucson, Arizona.
	Treasurer's mailing address (if different):	PO Box 304, Tucson, Arizona.
	Treasurer's email address (required):	me@MichaelOatman.net
	Treasurer's phone number (required):	(520) 302-5465
	Treasurer's employer (required):	Internet Convenience Store, L.L.C.
	Treasurer's occupation (required):	Webmaster, Consultant
Bank or Financial Institution: (do not list acct numbers)	Bank name (required):	Pyramid Federal Credit Union
	Additional bank name (if applicable):	
	Additional bank name (if applicable):	

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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: Mark T. Garza Date: 4/7/17

Treasurer's signature: Michael Oatman Date: 7 APR 2017

Candidate's signature (if applicable): See Above Date: _____