

Initial Application
 Amended Application
 Date: 7/08/17



**City of Tucson
 COMMITTEE STATEMENT
 OF ORGANIZATION**

COMMITTEE ID NUMBER
 (office use only)
17-280-CT

*Amended to reflect change
 in mailing address & bank.
 Also - new ID# - 51*

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): _____

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: _____

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 CITY OF TUCSON RECEIVED

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): PIMA COUNTY REPUBLICAN PARTY
 (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)

*193957
 O-File X-CFA
 JMM*

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Date: 7/8/17



City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

17-280-CT

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 1740 E. FORT LOWELL RD. STE 140
TUCSON, AZ 85719
Committee's email address (required): HQ@PIMA GOP.ORG
Committee's phone number (if any): 520-321-1492
Committee's website (if any): PIMA GOP.ORG

Chairperson's Information: Chairperson's name (required): DAVID EPPHIMER
Chairperson's physical address (required): 3218 N. SAN SEBASTIAN, TUCSON
85715
Chairperson's mailing address (if different): SAME
Chairperson's email address (required): DAVID.EPPHIMER@COMCAST.NET
Chairperson's phone number (required): 520-661-4058
Chairperson's employer (required): RETIRED
Chairperson's occupation (required): RETIRED

Treasurer's Information: Treasurer's name (required): JOHN RICHARD DALTON
Treasurer's physical address (required): 2550 E. RIVER RD. #15102, TUCSON
85718
Treasurer's mailing address (if different): SAME
Treasurer's email address (required): JOHN DALTON GOP@GMAIL.COM
Treasurer's phone number (required): 248-277-2278
Treasurer's employer (required): COLLEGE STUDENT
Treasurer's occupation (required): COLLEGE STUDENT

Bank or Financial Institution: Bank name (required): COMMERCIAL BANK OF ARIZONA
(do not list acct numbers) Additional bank name (if applicable): NONE
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: 7/8/17

Treasurer's signature: _____

Date: 7/13/17

Candidate's signature (if applicable): _____

Date: _____