

- Initial Application
 Amended Application

Date: 04/14/2023



City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

23-348-CT

CITY OF TUCSON
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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: _____

Political Action Committee (PAC)

Committee Name (required): _____ Yes on 412 - TUC
(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): _____
(if applicable) 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
(if applicable) 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)
(if applicable)

223029
O-File, X-CFA

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COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
 (office use only)

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): _____
 Committee's email address (required): _____
 Committee's phone number (if any): _____
 Committee's website (if any): _____
Chairperson's Information: Chairperson's name (required): _____
 Chairperson's physical address (required): _____
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): _____
 Chairperson's phone number (required): _____
 Chairperson's employer (required): _____
 Chairperson's occupation (required): _____
Treasurer's Information: Treasurer's name (required): _____
 Treasurer's physical address (required): _____
 Treasurer's mailing address (if different): _____
 Treasurer's email address (required): _____
 Treasurer's phone number (required): _____
 Treasurer's employer (required): _____
 Treasurer's occupation (required): _____
Bank or Financial Institution: Bank name (required): _____
 (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: *Jan T. Iner* Date: 4.14.2023
 Treasurer's signature: _____ Date: _____
 Candidate's signature (if applicable): _____ Date: _____