

- ☒ Initial Application  
☐ Amended Application

Date: 1/7/25



# City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)

25-363-CT

COMMITTEE TYPE (choose one):

☒ **Candidate**

Committee Name (required):  
(first or last name & office)

Theresa Riel for Ward 6

Candidate Information:

Candidate's Name (required):

Theresa Riel

Candidate's mailing address (required):

4926 E Cooper St Tucson AZ 85711

Candidate's email address (required):

riel4ward6@gmail.com

Candidate's phone number (required):

520-269-2014

Candidate's website (if any):

Office Sought (choose one): ☐ Mayor

☒ Council Member, Ward 6

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

2025

Party Affiliation:  
(required)



Democrat

☐ Libertarian

☐ Republican

☐ Other:

☐ **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):  
(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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**City of Tucson  
 COMMITTEE STATEMENT  
 OF ORGANIZATION**

COMMITTEE ID NUMBER  
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25-363-CT

**COMMITTEE INFORMATION:**

**Contact Information:**

Committee's mailing address (required): 4926 E. Cooper St Tucson AZ 85711  
 Committee's email address (required): riel4ward6@gmail.com  
 Committee's phone number (if any): 520-269-2014  
 Committee's website (if any): \_\_\_\_\_

**Chairperson's Information:**

Chairperson's name (required): Theresa Riel  
 Chairperson's physical address (required): 4926 E. Cooper St  
 Chairperson's mailing address (if different): same  
 Chairperson's email address (required): riel4ward6@gmail.com  
 Chairperson's phone number (required): 520-269-2014  
 Chairperson's employer (required): retired  
 Chairperson's occupation (required): Mathematics Faculty Retired - Pima C.C.

**Treasurer's Information:**

Treasurer's name (required): Theresa Riel  
 Treasurer's physical address (required): 4926 E Cooper St  
 Treasurer's mailing address (if different): same  
 Treasurer's email address (required): riel4ward6@gmail.com  
 Treasurer's phone number (required): 520-269-2014  
 Treasurer's employer (required): retired  
 Treasurer's occupation (required): Retired Mathematics Faculty - Pima Comm. College

**Bank or Financial Institution:**  
 (do not list acct numbers)

Bank name (required): Vantage West  
 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: Theresa M. Riel

Date: 1-6-2025

Treasurer's signature: Theresa M. Riel

Date: 1-6-2025

Candidate's signature (if applicable): Theresa M. Riel

Date: 1-6-2025

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