

- ☐ Initial Application
☒ Amended Application

Date: 06 MAR 2025



**City of Tucson
COMMITTEE STATEMENT
OF ORGANIZATION**

COMMITTEE ID NUMBER
(office use only)

25-367-CT

CITY OF TUCSON
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COMMITTEE TYPE (choose one):

☒ **Candidate**

Committee Name (required): _____ **Sinex for Ward 6**
(first or last name & office)

Candidate Information: Candidate's Name (required): _____ **James M. Sinex**
Candidate's mailing address (required): _____ **3346 E Lester Street**
Candidate's email address (required): _____ **Jim@JimSinex.org**
Candidate's phone number (required): _____ **(520)289-7315**
Candidate's website (if any): _____ **www.JimSinex.org**

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): ☐ Contributions ☐ Candidate-Related Independent Expenditures
(select any that apply) ☐ 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)

**231704
X-CFA O-File**

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COMMITTEE STATEMENT
OF ORGANIZATION**

COMMITTEE ID NUMBER
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25-367-CT

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 3346 E Lester Street
Committee's email address (required): Jim@JimSinex.org
Committee's phone number (if any): (520)289-7315
Committee's website (if any): www.JimSinex.org

Chairperson's Information: Chairperson's name (required): James M Sinex
Chairperson's physical address (required): 3346 E Lester Street
Chairperson's mailing address (if different): 3346 E Lester Street
Chairperson's email address (required): Jim@JimSinex.org
Chairperson's phone number (required): (520)289-7315
Chairperson's employer (required): N/A
Chairperson's occupation (required): Retired Public School Teacher

Treasurer's Information: Treasurer's name (required): James M Sinex
Treasurer's physical address (required): 3346 E Lester Street
Treasurer's mailing address (if different): 3346 E Lester Street
Treasurer's email address (required): Jim@JimSinex.org
Treasurer's phone number (required): (520)289-7315
Treasurer's employer (required): N/A
Treasurer's occupation (required): Retired Public School Teacher

Bank or Financial Institution: Bank name (required): Vantage West
(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: James M Sinex

Date: 06 MAR 25

Treasurer's signature: James M Sinex

Date: 06 MAR 25

Candidate's signature (if applicable): James M Sinex

Date: 06 MAR 25