Date: 10/15/2019



City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER (office use only)

COMMITTEE TYPE (choose one):

Candidate	Miguel Ortogo for Council	
Committee Name (required): (first or last name & office)	Miguel Ortega for Council	
Candidate Information:	Candidate's Name (required): Miguel Ortega	
<i></i>	Candidate's mailing address (required): 1546 N. Old Ranch Rd., Tucson, AZ	
	Candidate's email address (required): campaign@ortegaforcouncil.com	
	Candidate's phone number (required): (520) 308-2069	
	Candidate's website (if any):	
Office Sought (choose one):	☐ Mayor ☐ Council Member, Ward1	
Election Cycle for Office Soug	tht (year the election will take place) (required):	
Party Affiliation: (required)	■ Democrat □ Libertarian □ Republican □ Other:	
☐ Political Action Comn	nittee (PAC)	_
Committee Name (required): (if sponsored, must include sponsor's name)	Auser.	
Political Function (optional):	☐ Contributions ☐ Candidate-Related Independent Expenditures	
(select any that apply)	□ Ballot Measure Expenditures □ Recall Expenditures □	70 79
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):	
Special Status must be filed	Sponsor's website (if any): with Secretary of State Separate Segregated Fund of a Corporation, LLC, Partnership, or Union	v
(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)	n)
☐ 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 (if applicable)	with Secretary of State Standing Committee (must also complete separate standing committee registration)	эе

Date: 10/15/2019



City of Tucson COMMITTEE STATEMENT **OF ORGANIZATION**

COMMITTEE ID NUMBER (office use only)

COMMITTEE INFORMATION:

Contact Information:	Committee's mailing address (required): _	1505 W. St. Mary's Rd. #208
	Committee's email address (required):	campaign@ortegaforcouncil.com
	Committee's phone number (if any):	(=00) 000 0000
	Committee's website (if any):	variate Ortogofor Council com
Chairperson's Information:	Chairperson's name (required):	
Champerson's information.	Chairperson's physical address (required):	1516 N. Old Danah Daad
	Chairperson's mailing address (if different):	1505 W. St. Mary's Rd. #208
	Chairperson's email address (required):	
	Chairperson's phone number (required):	(500) 000 0000
	Chairperson's employer (required):	
	Chairperson's occupation (required):	
Treasurer's Information:	Treasurer's name (required):	Wenona Baldenegro
	Treasurer's physical address (required):	
	Treasurer's mailing address (if different):	1505 W. St. Mary's Rd. #208
	Treasurer's amail address (required):	campaign@ortegaforcouncil.com
	Treasurer's phone number (required):	
	Treasurer's employer (required):	Self
	Treasurer's occupation (required):	Attorney
Deale on Financial Institution	Bank name (required):	Vantage West Credit Union
Bank or Financial Institution: (do not list acct numbers)		<u> </u>
,		

DECLARATION AND SIGNATURES:

Candidate's signature (if applicable): __

PECLANATION AND SIGNATURES.			
I declare under penalty of perjury that the foregoing information is true and correct. I chairperson or treasurer of the committee named herein, if applicable; (2) designate the a committee and authorize it to receive/make contributions/expenditures on my behalf, if are campaign finance and reporting guide; (4) agree to comply with Arizona election law, inc §§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of process address(es) provided herein.	bove-name oplicable; (3 luding camp	d committee as my official candida:) have read the Secretary of State paign finance laws codified at A.R.S	te s's S.
Chairperson's signature:	Date:	10/15/19	
Treasurer's signature:	Date:	10/15/19	
Candidate's signature (if applicable):	Date:	10/15/19	

File contents: ORTEGA FOR COUNCIL Statement of Organization AMENDED (10.15.19)

File Uploaded: Tue October 15, 2019 4:58pm

File uploaded by: ortegacamp

Finalized on Wed October 16, 2019 2:08pm by amarruf1

Electronic signature: Miguel Ortega signed from miguel.riosonora@gmail.com on 10-15-2019 05:33:31pm

Electronic signature: Wenona Baldenegro signed from wbenally@gmail.com on 10-15-2019 04:59:58pm