

- Initial Application
- Amended Application

Date: 03/30/2017



City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

16-257-CT

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): Chew for Ward 3 Council
(first or last name & office)

Candidate Information: Candidate's Name (required): Felicia Chew
 Candidate's mailing address (required): 917 E Pastime Rd Tucson, AZ 85719
 Candidate's email address (required): chewfortucson@gmail.com
 Candidate's phone number (required): (520) 909-3888
 Candidate's website (if any): www.chewfortucson.com

Office Sought (choose one): Mayor Council Member, Ward 3

Election Cycle for Office Sought (year the election will take place) (required): 2017

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)

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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)

Bo 192271 *DM*
 e-File X-CFA

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Date: 03/30/2017



City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

16-257-C

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 917 E Pastime Rd Tucson, AZ 85719
 Committee's email address (required): chewfortucson@gmail.com
 Committee's phone number (if any): (520) 909-3888
 Committee's website (if any): www.chewfortucson.com

Chairperson's Information: Chairperson's name (required): Felicia Chew
 Chairperson's physical address (required): _____
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): chewfortucson@gmail.com
 Chairperson's phone number (required): (520) 909-3888
 Chairperson's employer (required): TUSD
 Chairperson's occupation (required): Teacher

Treasurer's Information: Treasurer's name (required): Laura Talarsky Stevens
 Treasurer's physical address (required): ~~420 W 17th St #1 Tucson, AZ 85701~~
 Treasurer's mailing address (if different): 3910 E. La Creciente, Tucson, AZ 85711
 Treasurer's email address (required): tallerskies@yahoo.com
 Treasurer's phone number (required): (201) 725-3545
 Treasurer's employer (required): TUSD- ESI
 Treasurer's occupation (required): Teacher

Bank or Financial Institution: Bank name (required): Wells Fargo
 (do not list acct numbers) Additional bank name (if applicable): _____
 Additional bank name (if applicable): _____

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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: _____

Treasurer's signature: 

Date: 4/3/2017

Candidate's signature (if applicable): 

Date: 3/27/17