

City of Tucson
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

17-270-CT

- Initial Application
- Amended Application

Date: 2 JUNE 2017



Amended to reflect change in Chair person. →

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): Michael Oatman For Tucson Ward 6
(first or last name & office)

Candidate Information: Candidate's Name (required): Michael Oatman
Candidate's mailing address (required): PO Box 304, Tucson, Arizona.
Candidate's email address (required): wardsix@MichaelOatman.info
Candidate's phone number (required): (520)302-5465
Candidate's website (if any): MichaelOatman.info

OFFICE OF THE CITY CLERK
17 JUN 12 2017
CITY OF TUCSON RECEIVED

Office Sought (choose one): Mayor Council Member, Ward 6

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

Party Affiliation (required): Democrat Libertarian Republican Other: Green Party

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: 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)

Initial Application
 Amended Application

Date: 2 JUNE 2017



City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): PO Box 304, Tucson, Arizona. 85702.
Committee's email address (required): wardsix@MichaelOatman.info
Committee's phone number (if any): (520) 302-5465
Committee's website (if any): MichaelOatman.info

Chairperson's Information: Chairperson's name (required): Franklin D. Van Ardoy Jr.
Chairperson's physical address (required): 1526 W Wetmore Rd, Tucson, AZ 85705. #1
Chairperson's mailing address (if different): PO Box 304, Tucson, Arizona. 85702.
Chairperson's email address (required): chair@MichaelOatman.info
Chairperson's phone number (required): (520) 302-5465
Chairperson's employer (required): Retired
Chairperson's occupation (required): Former Lecturer

Treasurer's Information: Treasurer's name (required): Michael Oatman
Treasurer's physical address (required): 2731 N Fair Oaks Ave, Tucson, Arizona.
Treasurer's mailing address (if different): PO Box 304, Tucson, Arizona.
Treasurer's email address (required): treasurer@MichaelOatman.info
Treasurer's phone number (required): (520) 302-5465
Treasurer's employer (required): Internet Convenience Store, L.L.C.
Treasurer's occupation (required): Webmaster, Consultant

Bank or Financial Institution: Bank name (required): Pyramid Federal Credit Union
(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:

Date: 1 June 2017

Treasurer's signature:

Date: 1 June 2017

Candidate's signature (if applicable): See Above

Date: _____