⚠ Initial Application☐ Amended Application

Date: 4 30 19



## City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER (office use only)

19-305-CT

## **COMMITTEE INFORMATION:**

	Contact Information:	Committee's mailing address (required): 4850 E COPPER ST TXCS
		Committee's email address (required): ROBERT CBEVS (a 6 72)
		Committee's phone number (if any):
		Committee's website (if any):
	Chairperson's Information:	Chairperson's name (required): ROBIRT REUS
	The second secon	Chairperson's physical address (required): 4850 5 COPPER 50 TVCS
		Chairperson's mailing address (if different):
		Chairperson's email address (required): 5AN 5
		Chairperson's phone number (required):
		Chairperson's employer (required): 526 F
		Chairperson's occupation (required); RETAIL WHOLESALS SALES
	Treasurer's Information:	Treasurer's name (required): ROBERT REUS
		Treasurer's physical address (required): 4850 E CODIZE TUCSON
		Treasurer's mailing address (if different):
		Treasurer's email address (required):
		Treasurer's phone number (required): 520 -319 - 0352
		Treasurer's employer (required): 550F
		Treasurer's occupation (required): 54 M 5
	Bank or Financial Institution:	Bank name (required):
	(do not list acct numbers)	Additional bank name (if applicable):
		Additional bank name (if applicable):
D	ECLARATION AND SIGNATI	JRES:
منسده		
	I declare under penalty of p	erjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as
	committee and authorize it to	e committee named herein, if applicable; (2) designate the above-named committee as my official candidate receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's
	campaign finance and reporti	ng 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) address(es) provided herein.	agree to accept all notifications and legal service of process for campaign finance purposes via the email
		Nobel Dead 16 30 10
	Chairperson's signature:	120ml 11elis Date: 4-30-19
	*	7 1 1 2
	Treasurer's signature:	bout fleels Date: 4-30-19
	Treasurer's signature.	Date:
		Rohit Rees 4-30-19
	Candidate's signature (if appli	cable): 120hil 100ld Date: 4-30-19

A	Initial Application
	Amended Application

Date: 4/30/19



## City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER (office use only)

19-305-CT

☐ Candidate  Committee Name (required):	REUS FOR COUNCIL
(first or last name & office)	Candidate's Name (required): ROBERT REUS
	Candidate's mailing address (required): 4830 \$ CODED 10038.
	Candidate's email address (required): ROBERT L'REUS CO 6 M
	Candidate's phone number (required): 520 - 319 - 0352
	Candidate's website (if any):
Office Sought (choose one):	□ Mayor Council Member, Ward
Election Cycle for Office Soug	ht (year the election will take place) (required):
	1
Party Affiliation: (required)	□ Democrat □ Libertarian □ Republican □ Other:
□ Political Action Comm Committee Name (required): (if sponsored, must include sponsor's name)  Political Function (optional): (select any that apply)  Sponsorship Information: (if applicable)	
Special Status must be filed (if applicable)	177
☐ 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)