

- Initial Application
- Amended Application

Date: \_\_\_\_\_



**City of Tucson  
COMMITTEE STATEMENT  
OF ORGANIZATION**

CITY OF TUCSON  
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**COMMITTEE TYPE** (choose one):

**Candidate**

*Committee Name* (required): \_\_\_\_\_  
(first or last name & office)

*Candidate Information:* Candidate's Name (required): \_\_\_\_\_  
Candidate's mailing address (required): \_\_\_\_\_  
Candidate's email address (required): \_\_\_\_\_  
Candidate's phone number (required): \_\_\_\_\_  
Candidate's website (if any): \_\_\_\_\_

*Office Sought* (choose one):  Mayor  Council Member, Ward \_\_\_\_\_

*Election Cycle for Office Sought* (year the election will take place) (required): \_\_\_\_\_

*Party Affiliation:* (required)  Democrat  Libertarian  Republican  Other: \_\_\_\_\_

**Political Action Committee (PAC)**

*CITIZENS FOR A SAFE & PROSPEROUS TUCSON PAC*

*Committee Name* (required): *CITIZENS FOR A SAFE & PROSP*  
(if sponsored, must include sponsor's name)

*Political Function* (optional): (select any that apply)  Contributions  Candidate-Related Independent Expenditure \_\_\_\_\_  
 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 Corp \_\_\_\_\_  
 Standing Committee (must also complete separ \_\_\_\_\_  
 Mega PAC (must provide proof of Mega PAC status to filing \_\_\_\_\_

**Political Party**

*Committee Name* (required): \_\_\_\_\_  
(must include party affiliation)

*Jurisdiction:*  State Party (must include proof of qualification pursuant to A.R.S. § \_\_\_\_\_  
 County Party (must include proof of qualification pursuant to A.R.S. \_\_\_\_\_  
 Legislative District Party (must include proof of organization pursuant \_\_\_\_\_  
 City or Town Party (must include proof of qualification pursuant to A.R.S. \_\_\_\_\_

*Special Status must be filed with Secretary of State* (if applicable)  Standing Committee (must also complete registration) \_\_\_\_\_

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## City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)

**COMMITTEE INFORMATION:**

*Contact Information:*

Committee's mailing address (required): PO Box 13307, Tucson, AZ 85732  
 Committee's email address (required): citizens4Tucson@gmail.com  
 Committee's phone number (if any): 520-307-5586  
 Committee's website (if any): \_\_\_\_\_

*Chairperson's Information:*

Chairperson's name (required): Joseph Morgan  
 Chairperson's physical address (required): 2545 N Rising Star Trl, Tucson AZ 85745  
 Chairperson's mailing address (if different): PO Box 13307, Tucson, 85732  
 Chairperson's email address (required): commonsensemorgan@gmail.com  
 Chairperson's phone number (required): 520-307-5586  
 Chairperson's employer (required): PIMA COLLEGE - UPWARD Bound  
 Chairperson's occupation (required): INSTRUCTOR

*Treasurer's Information:*

Treasurer's name (required): KAREN SCHUTTE  
 Treasurer's physical address (required): 1622 W INIA RD Tucson, AZ 85704  
 Treasurer's mailing address (if different): \_\_\_\_\_  
 Treasurer's email address (required): karenschutte@hotmail.com  
 Treasurer's phone number (required): 520-241-2256  
 Treasurer's employer (required): self employed  
 Treasurer's occupation (required): Blogger

*Bank or Financial Institution:*  
(do not list acct numbers)

Bank name (required): Canyon Community Bank  
 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: Joseph Morgan

Date: 09/09/19

Treasurer's signature: K Schutte

Date: 9-9-19

Candidate's signature (if applicable): \_\_\_\_\_

Date: \_\_\_\_\_