

- Initial Application
- Amended Application

Date: _____



City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

19-299-CT

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): _____ Santa Cruz for Tucson

Candidate Information:
 Candidate's Name (required): _____ Lane Santa Cruz
 Candidate's mailing address (required): _____ 868 W Calle Carasol Tucson, AZ 85713
 Candidate's email address (required): _____ info@santacruzfortucson.com
 Candidate's phone number (required): _____ (520) 440-6950
 Candidate's website (if any): _____ www.santacruzfortucson.com

Office Sought (choose one): Mayor Council Member, Ward 4

Election Cycle for Office Sought (year the election will take place) (required): _____ 2019

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

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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)

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)

0-203694

RSM

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**City of Tucson
 COMMITTEE STATEMENT
 OF ORGANIZATION**

COMMITTEE ID NUMBER
 (office use only)
19-299-C7

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): PO Box 745 Tucson, AZ 85702
 Committee's email address (required): info@santacruzfortucson.com
 Committee's phone number (if any): (520) 329-3605
 Committee's website (if any): www.santacruzfortucson.com

Chairperson's Information: Chairperson's name (required): _____
 Chairperson's physical address (required): _____
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): _____
 Chairperson's phone number (required): _____
 Chairperson's employer (required): _____
 Chairperson's occupation (required): _____

Treasurer's Information: Treasurer's name (required): Shasta McManus
 Treasurer's physical address (required): 4442 E Pima St. Tucson 85712
 Treasurer's mailing address (if different): _____
 Treasurer's email address (required): ShastaM@SIMGInc.com
 Treasurer's phone number (required): 520-822-7343
 Treasurer's employer (required): Strategic Issues Management Group Inc.
 Treasurer's occupation (required): Consultant

Bank or Financial Institution: Bank name (required): National Bank of Arizona
 (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: Shasta McManus Date: 2/15/19

Candidate's signature (if applicable): _____ Date: _____