

Initial Application  
 Amended Application  
 Date: 1/9/17



**City of Tucson  
 COMMITTEE STATEMENT  
 OF ORGANIZATION**

COMMITTEE ID NUMBER  
 (office use only)  
17-264-CT

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:  Democrat  Libertarian  Republican  Other: \_\_\_\_\_  
 (required)

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**Political Action Committee (PAC)**

Committee Name (required): Invest in Tucson 2017  
 (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  
 (if applicable) registration)

Revised: December 2016  
190953  
 X-CFA 0-F.1e  
 [Handwritten initials]

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 OF ORGANIZATION**

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 (office use only)  
17-264-CT

**COMMITTEE INFORMATION:**

*Contact Information:* Committee's mailing address (required): 4500 E. Speedway, Suite 41, Tucson, AZ 85712  
 Committee's email address (required): investintucson2017@gmail.com  
 Committee's phone number (if any): \_\_\_\_\_  
 Committee's website (if any): investintucson2017.com

*Chairperson's Information:* Chairperson's name (required): THOMAS W. WARNE  
 Chairperson's physical address (required): 6701 N. ST. ANDREWS DR TUCSON AZ  
 Chairperson's mailing address (if different): 70 W. CUSHING ST TUC AZ 85701 85718  
 Chairperson's email address (required): THINVESTMENTS@aol.com  
 Chairperson's phone number (required): 520 884 8843  
 Chairperson's employer (required): SELF  
 Chairperson's occupation (required): COMMERCIAL REAL ESTATE DEVELOPER

*Treasurer's Information:* Treasurer's name (required): Rebecca Wicker  
 Treasurer's physical address (required): 4500 E. Speedway, Suite 41, Tucson, AZ 85712  
 Treasurer's mailing address (if different): \_\_\_\_\_  
 Treasurer's email address (required): beccawicker@gmail.com  
 Treasurer's phone number (required): (520) 310-1619  
 Treasurer's employer (required): self  
 Treasurer's occupation (required): business owner

*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: Thomas W. Warne Date: JAN 9, 2017

Treasurer's signature: [Signature] Date: 1/9/17

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