

Initial Application
 Amended Application
 Date: 7/11/17



**City of Tucson
 COMMITTEE STATEMENT
 OF ORGANIZATION**

COMMITTEE ID NUMBER
 (office use only)
17-275-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)

CITY OF TUCSON
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 OFFICE OF THE
 CITY CLERK

Political Action Committee (PAC)

Committee Name (required): SAHBA PAC - Candidate
 (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): SAHBA
 (if applicable) Sponsor's mailing address (required): 2840 N. Country Club Rd. Tucson, AZ 85716
 Sponsor's email address (required): David@sahba.org
 Sponsor's phone number (if any): 520-795-5114
 Sponsor's website (if any): www.sahba.org

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)

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**City of Tucson
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OF ORGANIZATION**

COMMITTEE ID NUMBER
(office use only)

COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required): 2840 N. Country Club Rd. Tucson, AZ 85716
 Committee's email address (required): David@sahba.org
 Committee's phone number (if any): 520-795-5114
 Committee's website (if any): www.sahba.org

Chairperson's Information:

Chairperson's name (required): Edward CastelPhano
 Chairperson's physical address (required): 12251 N. Hlas Dr. Tucson, AZ 85742
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): Cassmar58@gmail.com
 Chairperson's phone number (required): 520-548-9115
 Chairperson's employer (required): Cassmar Development
 Chairperson's occupation (required): Builder

Treasurer's Information:

Treasurer's name (required): David Gallewski
 Treasurer's physical address (required): 2840 N. Country Club Rd. Tucson, AZ 85716
 Treasurer's mailing address (if different): _____
 Treasurer's email address (required): David@sahba.org
 Treasurer's phone number (required): 520-795-5114
 Treasurer's employer (required): Southern Arizona Home Builders Association
 Treasurer's occupation (required): President

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

Bank name (required): _____
 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: *Edward CastelPhano*

Date: 7/11/17

Treasurer's signature: *David Gallewski*

Date: 7/11/17

Candidate's signature (if applicable): _____

Date: _____