

Initial Application
 Amended Application
 Date: 1/18/19



City of Tucson
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
 (office use only)
19-297-CT

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): Sami Hamed for City Council
 (first or last name & office)

Candidate Information: Candidate's Name (required): Sami Hamed
 Candidate's mailing address (required): 216 N Grande Ave, Tucson, AZ 85745
 Candidate's email address (required): sami@samihamed.com
 Candidate's phone number (required): (520) 903-1190
 Candidate's website (if any): SamiHamed.com

Office Sought (choose one): Mayor Council Member, Ward 1

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

Party Affiliation: 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): 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 registration)
 (if applicable)

0-203279

- Initial Application
- Amended Application

Date: _____



City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

19-297-CT

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): PO Box 665, Tucson, AZ 85745
 Committee's email address (required): info@samihamed.com
 Committee's phone number (if any): (520) 245-7867
 Committee's website (if any): SamiHamed.com

Chairperson's Information: Chairperson's name (required): Bob Rodriguez
 Chairperson's physical address (required): 930 W Franklin St, Tucson, AZ 85745
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): info@samihamed.com
 Chairperson's phone number (required): (520) 903-1190
 Chairperson's employer (required): Self
 Chairperson's occupation (required): Retired

Treasurer's Information: Treasurer's name (required): Barbara May Wright
 Treasurer's physical address (required): 1050 S Bill Martin Dr Apt 8102, Tucson, AZ 85745
 Treasurer's mailing address (if different): _____
 Treasurer's email address (required): info@samihamed.com
 Treasurer's phone number (required): (520) 903-1190
 Treasurer's employer (required): Pima Community College
 Treasurer's occupation (required): Adjunct Faculty

Bank or Financial Institution: Bank name (required): Chase
 (do not list acct numbers) 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: *Bob Rodriguez* Date: 01/17/2019

Treasurer's signature: *Barbara May Wright* Date: 01/17/2019

Candidate's signature (if applicable): *Sam Hamed* Date: 01/17/2019