

Initial Application
 Amended Application

Date: _____



**City of Tucson
 COMMITTEE STATEMENT
 OF ORGANIZATION**

COMMITTEE ID NUMBER
 (office use only)
20-320-CT

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): _____
 Committee's email address (required): _____
 Committee's phone number (if any): _____
 Committee's website (if any): _____

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

Bank or Financial Institution: Bank name (required): _____
 (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: Text Date: _____

Treasurer's signature: Date: _____

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

**O-File
 213030**