



YUMA COUNTY
COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER (office use only)

- Initial Application
Amended Application
Date: _____

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):

- Assessor, Attorney, Clerk of Superior Court, Recorder, School Superintendent, Sheriff, Treasurer, Board of Supervisors - District, Constable - Precinct, Justice of the Peace - Precinct, Superior Court Judge- Division, Other Office: District (if applicable)

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

Party Affiliation: Democrat, Green, Libertarian, Republican, Other:

Political Action Committee (PAC)

Committee Name (required): (if sponsored, must include sponsor's name)

Political Function (optional): Contributions, Candidate-Related Independent Expenditures, Ballot Measure Expenditures, Recall Expenditures

Sponsorship Information: 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 (if applicable): Separate Segregated Fund of a Corporation, LLC, Partnership, or Union, Standing Committee, Mega PAC

Political Party

Committee Name (required): (must include party affiliation)

Jurisdiction: State Party, County Party, Legislative District Party, City or Town Party

Special Status (if applicable): Standing Committee



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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: _____ Date: _____

Treasurer's signature: _____ Date: _____

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