



POLITICAL COMMITTEE STATEMENT OF ORGANIZATION

INITIAL REGISTRATION
 OUT OF STATE COMMITTEE
 AMENDED STATEMENT

ID #

NAME OF POLITICAL COMMITTEE			
ADDRESS		CITY	STATE ZIP
MAILING ADDRESS		CITY	STATE ZIP
COMMITTEE PHONE	COMMITTEE FAX	COMMITTEE EMAIL	

DOES THE POLITICAL COMMITTEE HAVE A SPONSORING ORGANIZATION?
 YES NO
 IF YES, PLEASE PROVIDE THE FOLLOWING INFORMATION:

NAME OF SPONSORING ORGANIZATION	TYPE OF ORGANIZATION
ADDRESS OF SPONSORING ORGANIZATION	RELATIONSHIP TO POLITICAL COMMITTEE

TYPE OF POLITICAL COMMITTEE – Please check only one box:

- CANDIDATE'S CAMPAIGN COMMITTEE
- EXPLORATORY COMMITTEE
- SEPARATE SEGREGATED FUND ESTABLISHED PURSUANT TO A.R.S. § 16-920(A)(3)
- ASSOCIATION OR COMBINATION OF PERSONS THAT CIRCULATES PETITIONS IN SUPPORT OF THE QUALIFICATION OF A BALLOT MEASURE, QUESTION OR PROPOSITION
- ASSOCIATION OR COMBINATION OF PERSONS THAT CIRCULATES A PETITION TO RECALL A PUBLIC OFFICER

- POLITICAL ORGANIZATION (an organization that is formally affiliated with and recognized by a political party including a district committee organized pursuant to A.R.S. § 16-823)
- POLITICAL PARTY (only county committees of an organization that meets the requirements for recognition as a political party pursuant to A.R.S. § 16-801, 16-802 or 16-804)
- OTHER – AN ASSOCIATION OR COMBINATION OF PERSONS THAT MEETS BOTH OF THE FOLLOWING REQUIREMENTS OF A.R.S. § 16-901(20)(f):
 1. Is organized for the purpose of influencing the result of an election.
 2. Knowingly receives contributions or makes expenditures of more than \$500 in connection with any election during a calendar year.

EACH POLITICAL COMMITTEE SHALL HAVE A CHAIRMAN AND TREASURER. THE POSITION OF CHAIRMAN AND TREASURER OF A SINGLE POLITICAL COMMITTEE MAY NOT BE HELD BY THE SAME INDIVIDUAL, EXCEPT THAT A CANDIDATE MAY BE CHAIRMAN AND TREASURER OF HIS OR HER OWN CAMPAIGN COMMITTEE. A.R.S. § 16-902(A).

COMMITTEE CHAIRMAN INFORMATION:

NAME	PHONE	EMAIL	
ADDRESS	CITY	STATE	ZIP
OCCUPATION	EMPLOYER		

COMMITTEE TREASURER INFORMATION:

NAME	PHONE	EMAIL	
ADDRESS	CITY	STATE	ZIP
OCCUPATION	EMPLOYER		

BEFORE A POLITICAL COMMITTEE ACCEPTS A CONTRIBUTION OR MAKES AN EXPENDITURE IT SHALL DESIGNATE AT LEAST ONE ACCOUNT AT A QUALIFIED FINANCIAL INSTITUTION, A.R.S. § 16-902(C). LIST THE NAMES OF ALL FINANCIAL INSTITUTIONS WITH WHICH THE COMMITTEE MAINTAINS ACCOUNTS OR SAFETY DEPOSIT BOXES. (DO NOT LIST ACCOUNT NUMBERS.)

FINANCIAL INSTITUTION NAME		
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FOR A CANDIDATE'S CAMPAIGN COMMITTEE OR AN EXPLORATORY COMMITTEE, PLEASE PROVIDE THE FOLLOWING INFORMATION:

CANDIDATE OR DESIGNATING INDIVIDUAL'S NAME		COUNTY	
ADDRESS	CITY	STATE	ZIP
OFFICE SOUGHT	PARTY	ELECTION YEAR	

DESIGNATING INDIVIDUAL OR CANDIDATE'S STATEMENT: I authorize the above named political committee as my political committee to receive contributions and make expenditures on my behalf. And I, the undersigned, have read all applicable laws relating to campaign finance and reporting.

DATE: _____ D/I'S OR CANDIDATE'S SIGNATURE: _____

CHAIRMAN'S AND TREASURER'S STATEMENT: We, the undersigned, have examined the information contained in this statement of organization and, to the best of our knowledge and belief, it is true, correct and complete. And we, the undersigned, have read all applicable laws relating to campaign finance and reporting.

DATE: _____ CHAIRMAN'S SIGNATURE: _____

DATE: _____ TREASURER'S SIGNATURE: _____