

PINAL COUNTY SCHOOL OFFICE ELECTION FORM

RECEIPT

FOR OFFICIAL USE ONLY	<input type="checkbox"/> SPECIAL	<input type="checkbox"/> DEMOCRAT	Voter Registration ID# _____ Pct. _____
	<input type="checkbox"/> PRIMARY	<input type="checkbox"/> REPUBLICAN	Political Organization ID# <u>2020001CSS</u>
	<input type="checkbox"/> GENERAL	<input type="checkbox"/> OTHER	

APPLICATION for Serial Number _____ ☐ RECALL ☐ INITIATIVE ☐ REFERENDUM

NAME OF COMMITTEE Filing: YES FOR FUSD KIDS

CANDIDATE Filing: _____

For the Office of: _____

_____ Nomination Petitions containing _____ names, subject to verification

- ☐ Nomination Paper/Affidavit of Qualification/Campaign Finance Laws Statement/Notarized
- ☐ Financial Disclosure Statement
- ☐ Write-In Candidate Nomination Paper/Affidavit of Qualification/Campaign Finance Laws Statement
- ☐ **Additional** Nomination Petitions containing _____ names.

REPORTING PERIOD

- ☐ Candidate Report w/o Organization ☐ Committee Report w/ Organization

X Statement of Organization (ID # 2020001CSS)

☐ Amended Filing (Indicate which Report _____)

☐ \$500 Threshold Exemption Statement

☐ No Activity Report

☐ Cumulative Report

☐ 1st Quarter Report

☐ 2nd Quarter Report

☐ August Pre-Election Report

☐ 3rd Quarter Report

☐ October Pre-Election Report

☐ 4th Quarter Report

☐ Termination Statement

☐ Bond Statement

☐ Fine (for failure to file on time) Days late _____, Report not filed _____ \$

RECEIVED

JUL 15 2020

PINAL COUNTY SCHOOL OFFICE

This is an acknowledgment that all forms required by law have been filed with the Pinal Co. School Office.

RECEIVED this 15 day of JULY, 2020

By Certified mail ☐ Regular mail X (Post date 07/15/2020); or in person by: _____

SIGNATURE/Candidate/Representative: _____

County School Office Dept./Initials MCK ☐ Dropped off by/walk-in: _____

☒ Initial Application
☐ Amended Application
Date: 7/16/2020



PINAL COUNTY COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

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): ☐ Governor ☐ Secretary of State ☐ Attorney General ☐ State Treasurer
☐ Superintendent of Public Instruction ☐ State Mine Inspector ☐ Corporation Commissioner
☐ State Senate ☐ State House of Representatives ☐ District (required): _____
☐ County Office: _____ ☐ District (if applicable): _____
☐ City/Town Office: _____ ☐ District (if applicable): _____

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

Party Affiliation: ☐ Democrat ☐ Green ☐ Libertarian ☐ Republican ☐ Other: _____
(required for partisan offices)

☐ **Political Action Committee (PAC)**

Committee Name (required): yes for FUSD kids
(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 (if applicable): ☐ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union
☐ 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 (if applicable): ☐ Standing Committee (must also complete separate standing committee registration)

☒ Initial Application
☐ Amended Application
Date: 7/16/2020



PINAL COUNTY
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

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): Shannon Weber
Chairperson's physical address (required): 5930 W. Quail Trl.
Chairperson's mailing address (if different): Queen Creek AZ 85142
Chairperson's email address (required): weberfamof4@gmail.com
Chairperson's phone number (required): 520-423-7874
Chairperson's employer (required): Kyrene School District #28
Chairperson's occupation (required): Transportation Supervisor

Treasurer's Information:

Treasurer's name (required): Paul Ulan
Treasurer's physical address (required): 5320 N. 16th St. Suite 411
Treasurer's mailing address (if different): Phoenix AZ 85016
Treasurer's email address (required): pulan@primaryconsultants.com
Treasurer's phone number (required): 602-294-0700
Treasurer's employer (required): SELF
Treasurer's occupation (required): consultant

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

Bank name (required): Bank of America
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: Shannon Weber Date: 7/8/2020

Treasurer's signature: Paul Ulan Date: 7/6/2020

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