

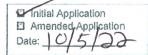
PINAL COUNTY

PINAL COUNTY COMMITTEE STATEMENT OF ORGANIZATION



COMMITTEE TYPE (choose one):

Committee Name (required):	The committee to elect Aris Correa for School Box
first or last name & office)	
Candidate Information:	Candidate's Name (required): Aris Correa Candidate's mailing address (required): 2577 N McDonald Ln
	Candidate's email address (required): Correc. a. a2@gmail.com
	Candidate's phone number (required): 520-250-2912
	Candidate's phote flamber (required).
Mr. O Makana anak	☐ Governor ☐ Secretary of State ☐ Attorney General ☐ State Treasurer
Office Sought (choose one):	☐ 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):
	0.0.2.2
election Cycle for Office Soug	m (join the closes) in this proof (colors)
Party Affiliation: required for partisan offices)	☐ Democrat ☐ Green ☐ Libertarian ☐ Republican ☐ Other:
El Political Action Com	nittee (PAC)
Committee Name (required):	N/A PINAL -
(if sponsored, must include sponsor's name)	PINAL COUNTY SCHOOL OFF
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	☐ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union
(if applicable)	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	11/1
Committee Name (required)	
(must include party affiliation	0.00 0.00 0.00 0.00 0.00 0.00 0.00
(must include party affiliation Jurisdiction:	☐ State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)
(must include party affiliation	County Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)
(must include party affiliation	County Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804) I Legislative District Party (must include proof of organization pursuant to A.R.S. § 16-823)
(must include party affiliation	County Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)



PINAL COUNTY

PINAL COUNTY **COMMITTEE STATEMENT OF ORGANIZATION**



COMMITTEE INFORMATION:

Contact Information:	Committee's mailing address (required): 2577 N. McDonald Ln C6A2 8512
	Committee's email address (required): Correa. a. az@gmail.com
	Committee's phone number (if any):
	Committee's website (if any):
Chairperson's Information:	Chairperson's name (required): Adelina Castellanos
onunporoun o monnadan.	Chairperson's physical address (required): 450 W Sunwest Dr., Lot 162
	Chairman and a saiding address (if different).
	Chairperson's email address (required):