

- ☒ Initial Application
☐ Amended Application

Date: 9/19/22



**PINAL COUNTY
COMMITTEE STATEMENT
OF ORGANIZATION**

COMMITTEE ID NUMBER
(office use only)

22004 CSS

COMMITTEE TYPE (choose one):

☒ **Candidate**

Committee Name (required):
(first or last name & office) _____

Candidate Information:

Candidate's Name (required): JEFFREY L. CARR

Candidate's mailing address (required): 7917 W. SARATOGA WAY, FLORENCE

Candidate's email address (required): MATZACHJAKE@GMAIL.COM

Candidate's phone number (required): 520-635-3802

Candidate's website (if any): JEFF4ED1.ORG

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): 2022

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

☐ **Political Action Committee (PAC)**

Committee Name (required):
(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:
(if applicable)

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 (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)

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SEP 19 2022

PINAL COUNTY SCHOOL OFFICE

☒ Initial Application
☐ Amended Application
Date: 9/19/22



PINAL COUNTY
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

22004CSS

COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required): 7917 W. SARATOGA WAY 85132
Committee's email address (required): JEFF4ED1@GMAIL.COM
Committee's phone number (if any): 520-635-3802
Committee's website (if any): JEFF4ED1.ORG

Chairperson's Information:

Chairperson's name (required): Carolyn Gerber
Chairperson's physical address (required): 4012 N. Hidden Canyon Dr 85132
Chairperson's mailing address (if different): _____
Chairperson's email address (required): happygrammy011@gmail.com
Chairperson's phone number (required): 612-210-0450
Chairperson's employer (required): Retired
Chairperson's occupation (required): Retired

Treasurer's Information:

Treasurer's name (required): Julie P. Bollinger
Treasurer's physical address (required): 7939 W. Saratoga Way
Treasurer's mailing address (if different): _____
Treasurer's email address (required): jilks@cox.net
Treasurer's phone number (required): 520-509-1443 Cell 970-387-3496
Treasurer's employer (required): RETIRED
Treasurer's occupation (required): RETIRED

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

Bank name (required): U.S. BANK
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: Carolyn Gerber Date: 9-19-22

Treasurer's signature: Julie P. Bollinger Date: 9-19-22

Candidate's signature (if applicable): Duffy L. Lu Date: 9/19/22