

☒ Initial Application
☐ Amended Application
Date: 8/25/22

PINAL COUNTY

PINAL COUNTY COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

22003CSS

COMMITTEE TYPE (choose one):

☒ Candidate

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

Jeri Taylor Committee to Elect

Candidate Information:

Candidate's Name (required): JERI TAYLOR

Candidate's mailing address (required): 65959 E. Catalina Hills Dr. Scottsdale, AZ 85739

Candidate's email address (required): taylorjeri@aol.com

Candidate's phone number (required): 253-279-6153

Candidate's website (if any): NONE

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: Oracle Elem School #2 ☐ District (if applicable): Governing Board

Election Cycle for Office Sought (year the election will take place) (required): 2022

Party Affiliation:

(required for partisan offices)

☒ Democrat ☐ Green ☐ Libertarian ☐ Republican ☐ Other: _____

NON-PARTISAN POSITION

☐ Political Action Committee (PAC)

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

Political Function (optional):
(select any that apply)

☐ Contributions ☐ Candidate-Related Independent Expenditures
☐ 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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AUG 25 2022

PINAL COUNTY SCHOOL OFFICE

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COMMITTEE STATEMENT
OF ORGANIZATION**

COMMITTEE ID NUMBER
(office use only)

22003CSS

COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required): 65959 E Catalina Hills Dr Saddlebrooke, AZ
Committee's email address (required): TAYLORJERI@AOL.COM
Committee's phone number (if any): 253-279-6153
Committee's website (if any): NONE

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:
(do not list acct numbers)

Bank name (required): BANK of West - Saddlebrooke Branch
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): Jeri Taylor Date: 8/25/2022

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