

Initial Application  
 Amended Application  
Date: 07/29/2024



# PINAL COUNTY COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)

24001CSS

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 AJ 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:** (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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 OF ORGANIZATION**

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 (office use only)  
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**COMMITTEE INFORMATION:**

**Contact Information:** Committee's mailing address (required): 5136 S Desert View Dr Apache Junction AZ 85120  
 Committee's email address (required): rhinodream1@gmail.com  
 Committee's phone number (if any): (480) 694-5100  
 Committee's website (if any): \_\_\_\_\_

**Chairperson's Information:** Chairperson's name (required): Robert Shippy  
 Chairperson's physical address (required): 5136 S Desert View Dr Apache Junction AZ 85120  
 Chairperson's mailing address (if different): \_\_\_\_\_  
 Chairperson's email address (required): rhinodream1@gmail.com  
 Chairperson's phone number (required): (480) 748-8331  
 Chairperson's employer (required): Self Employed  
 Chairperson's occupation (required): Self Employed

**Treasurer's Information:** Treasurer's name (required): Jeff Struble  
 Treasurer's physical address (required): 1660 S Alma School Rd #226 Mesa AZ 85210  
 Treasurer's mailing address (if different): PO Box 31867 Mesa Az 85275  
 Treasurer's email address (required): rhinodream1@gmail.com  
 Treasurer's phone number (required): (480) 694-5100  
 Treasurer's employer (required): Self Employed  
 Treasurer's occupation (required): Self employed

**Bank or Financial Institution:** Bank name (required): Wells Fargo  
 (do not list acct numbers) 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: [Signature] Date: 7-30-24  
 Treasurer's signature: [Signature] Date: 7-30-24  
 Candidate's signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

**RECEIVED**

JUL 31 2024

PINAL COUNTY SCHOOL OFFICE

[Signature]