PINAL COUNTY
COMMITTEE STATEMENT
OF ORGANIZATION

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JUN 01 2023

PINAL COUNTY SCHOOL OFFICE

Candidate

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

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 (required for partisan offices):
☐ Democrat ☐ Green ☐ Libertarian ☐ Republican ☐ Other: ___________________

Political Action Committee (PAC)

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

Political Function (optional): ☐ Contributions ☐ Candidate-Related Independent Expenditures
☐ Ballot Measure Expenditures ☐ Recall Expenditures

Sponsorship Information (if applicable): Sponsor's name or nickname (required): Hollace Lyon
Sponsor's mailing address (required): 37812 S. Desert Bluff Dr. Tucson 85739
Sponsor's email address (required): hollacelyon@gmail.com
Sponsor's phone number (if any): 520.822.6566
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)
COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): PO Box 8342 Tucson 85738
Committee's email address (required): hollacelyon@gmail.com
Committee's phone number (if any): ________________
Committee's website (if any): ________________

Chairperson's Information: Chairperson's name (required): Hollace Lyon
Chairperson's physical address (required): 37812 S. Desert Bluff Dr. Tucson, AZ 85739
Chairperson's mailing address (if different): ________________
Chairperson's email address (required): hollacelyon@gmail.com
Chairperson's phone number (required): ________________
Chairperson's employer (required): Retired
Chairperson's occupation (required): Retired

Treasurer's Information: Treasurer's name (required): Allan Lyon
Treasurer's physical address (required): 66116 E. Stoney Ridge Dr. Tucson, AZ 85739
Treasurer's mailing address (if different): ________________
Treasurer's email address (required): Metamathematics97@yahoo.com
Treasurer's phone number (required): 520.907.6666
Treasurer's employer (required): Retired
Treasurer's occupation (required): Retired

Bank or Financial Institution: Bank name (required): Bank of the West
Bank or Financial Institution: Bank name (required): Bank of the West
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: 5/16/23
Treasurer's signature: ____________________________ Date: 5/16/23
Candidate's signature (if applicable): ____________________________ Date: ____________________________

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Arizona Secretary of State Revision 11/5/16