

Initial Application  
 Amended Application  
 Date: March 26, 2020



STATE OF ARIZONA  
 COMMITTEE STATEMENT  
 OF ORGANIZATION

COMMITTEE ID NUMBER  
 (office use only)  
P20-08

2020 MAR 26 PM 12:07

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): Sara Curtis for Eloy City Council  
 (first or last name & office)

Candidate Information: Candidate's Name (required): Sara Curtis

Candidate's mailing address (required): 3830 N. Mohm Dr. Eloy, AZ 85131

Candidate's email address (required): saraecurtis@gmail.com

Candidate's phone number (required): 520-431-0440

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: City Council  District (if applicable): Eloy

Election Cycle for Office Sought (year the election will take place) (required): 2020

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: 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 (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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**P20-08**

COMMITTEE INFORMATION:

**Contact Information:**  
Committee's mailing address (required): 3830 N. Mohm Dr., Eloy, AZ 85131  
Committee's email address (required): Saraeccurtis@gmail.com  
Committee's phone number (if any): 520-431-0440  
Committee's website (if any): \_\_\_\_\_

**Chairperson's Information:**  
Chairperson's name (required): Sara Curtis  
Chairperson's physical address (required): 3830 N. Mohm drive, Eloy AZ 85131  
Chairperson's mailing address (if different): \_\_\_\_\_  
Chairperson's email address (required): Saraeccurtis@gmail.com  
Chairperson's phone number (required): 520-431-0440  
Chairperson's employer (required): Arizona Arsenal  
Chairperson's occupation (required): Professional Skydiver / business owner

**Treasurer's Information:**  
Treasurer's name (required): Sara Curtis  
Treasurer's physical address (required): 3830 N. Mohm Drive, Eloy AZ 85131  
Treasurer's mailing address (if different): \_\_\_\_\_  
Treasurer's email address (required): Saraeccurtis@gmail.com  
Treasurer's phone number (required): 520-431-0440  
Treasurer's employer (required): Arizona Arsenal  
Treasurer's occupation (required): Professional Skydiver / Business owner

**Bank or Financial Institution:**  
(do not list acct numbers)  
Bank name (required): Bank of America  
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: March 26, 2020

Treasurer's signature: [Signature] Date: March 26, 2020

Candidate's signature (if applicable): [Signature] Date: March 26, 2020