

Initial Application
 Amended Application
 Date: _____



STATE OF ARIZONA
 COMMITTEE STATEMENT
 OF ORGANIZATION

COMMITTEE ID NUMBER
 (office use only)
22-C-02

COMMITTEE TYPE (choose one):

RECEIVED

JAN 31 2022

TOWN CLERK
 TOWN OF PAYSON

Candidate

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

Ferris 4 Council

Candidate Information:

Candidate's Name (required):

Tim Ferris

Candidate's mailing address (required):

308 W. Ash Creek Ct., Payson, AZ 85541

Candidate's email address (required):

ferris4council@gmail.com

Candidate's phone number (required):

(480) 710-4807

Candidate's website (if any):

Office Sought (choose one):

County Office:

District (if applicable):

City/Town Office:

Council

District (if applicable):

School Board Office:

District (if applicable):

Special District Board:

District (if applicable):

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

2022

Party Affiliation:

(required for partisan offices)

Democrat

Green

Libertarian

Republican

Other:

Political Action Committee (PAC)

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

Ferris 4 Council

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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**STATE OF ARIZONA
 COMMITTEE STATEMENT
 OF ORGANIZATION**

COMMITTEE ID NUMBER
 (office use only)

COMMITTEE INFORMATION:

Contact Information:
 Committee's mailing address (required): 308 W. Ash Creek Ct., Payson, AZ 85541
 Committee's email address (required): ferris4council@gmail.com
 Committee's phone number (if any): (480) 710-4807
 Committee's website (if any): _____

Chairperson's Information:
 Chairperson's name (required): Jim Ferris
 Chairperson's physical address (required): 308 W. Ash Creek Ct., Payson, AZ 85541
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): jimlinks18@yahoo.com
 Chairperson's phone number (required): (480) 710-4807
 Chairperson's employer (required): Retired
 Chairperson's occupation (required): Retired

Treasurer's Information:
 Treasurer's name (required): Jim Ferris
 Treasurer's physical address (required): 308 W. Ash Creek Ct., Payson, AZ 85541
 Treasurer's mailing address (if different): _____
 Treasurer's email address (required): jimlinks18@yahoo.com
 Treasurer's phone number (required): (480) 710-4807
 Treasurer's employer (required): Retired
 Treasurer's occupation (required): Retired

Bank or Financial Institution:
 (do not list acct numbers) Bank name (required): National Bank of Arizona
 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: 1/31/2022
 Treasurer's signature: [Signature] Date: 1/31/2022
 Candidate's signature (if applicable): [Signature] Date: 1/31/2022