

CITY/TOWN OF Payson, Arizona

RECEIVED

POLITICAL COMMITTEE

FEB 01 2018

**STATEMENT OF ORGANIZATION**

*Titles 16 & 19 Arizona Revised Statutes*

*Definitions, statutory references and important information on reverse.*

TOWN CLERK  
TOWN OF PAYSON

<input checked="" type="checkbox"/> INITIAL REGISTRATION		<input type="checkbox"/> OUT OF STATE COMMITTEE	<input type="checkbox"/> AMENDED STATEMENT	ID# <u>18-I-01</u>
NAME OF POLITICAL COMMITTEE <u>Transparent Payson</u>			DATE <u>1/31/2018</u>	
ADDRESS (NUMBER & STREET) <u>1422 N. Sunrise Court</u>		CITY <u>Payson</u>	STATE <u>AZ</u>	ZIP <u>85541</u>
MAILING ADDRESS (if different from above)		CITY	STATE	ZIP
COMMITTEE TELEPHONE # <u>480 628 6818</u>	COMMITTEE FAX # <u>877 684 4788</u>	COMMITTEE E-MAIL ADDRESS <u>info@transparentpayson.org</u>		
DOES THE POLITICAL COMMITTEE HAVE A SPONSORING ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, please provide the following information:				
NAME OF SPONSORING ORGANIZATION		TYPE OF ORGANIZATION		
ADDRESS OF SPONSORING ORGANIZATION		RELATIONSHIP TO POLITICAL COMMITTEE		
<b>TYPE OF POLITICAL COMMITTEE - Please check only one box:</b>				
<input type="checkbox"/> CANDIDATE'S CAMPAIGN COMMITTEE		<input type="checkbox"/> COMMITTEE ORGANIZED FOR THE PURPOSE OF MAKING INDEPENDENT EXPENDITURES		
<input type="checkbox"/> SEPARATE SEGREGATED FUND ESTABLISHED BY A CORPORATION OR LABOR ORGANIZATION		<input type="checkbox"/> COMMITTEE ORGANIZED IN SUPPORT OF OR OPPOSITION TO ONE OR MORE CANDIDATES		
<input checked="" type="checkbox"/> COMMITTEE IN SUPPORT OF OR OPPOSITION TO THE QUALIFICATION, PASSAGE OR DEFEAT OF A BALLOT MEASURE*		<input type="checkbox"/> POLITICAL ORGANIZATION (see A.R.S. § 16-823)		
*Petition Serial Number _____ Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/>		<input type="checkbox"/> EXPLORATORY COMMITTEE		
<input type="checkbox"/> COMMITTEE ORGANIZED TO CIRCULATE OR OPPOSE A RECALL PETITION OR TO INFLUENCE THE RESULT OF A RECALL ELECTION*		<input type="checkbox"/> OTHER TYPE OF COMMITTEE (please describe)		
<input type="checkbox"/> POLITICAL PARTY (see A.R.S. §§ 16-801, 16-804, 16-821 and 16-825)		_____		
<input type="checkbox"/> CHECK HERE IF REGISTERED WITH THE SECRETARY OF STATE AS A STANDING POLITICAL COMMITTEE PURSUANT TO A.R.S. § 16-902.01. (You must provide a copy of the statement of organization filed with the Secretary of State designating standing committee status)				
EACH POLITICAL COMMITTEE SHALL HAVE A CHAIRMAN AND TREASURER. THE POSITION OF CHAIRMAN AND TREASURER OF A SINGLE POLITICAL COMMITTEE MAY NOT BE HELD BY THE SAME INDIVIDUAL, EXCEPT THAT A CANDIDATE MAY BE CHAIRMAN AND TREASURER OF HIS OR HER OWN CAMPAIGN COMMITTEE. A.R.S. §16-902(A).				
NAME OF COMMITTEE CHAIRMAN <u>Jeffrey Aal</u>	CHAIRMAN'S TELEPHONE # <u>480 628 6818</u>	CHAIRMAN'S FAX # <u>877 684 4788</u>		
CHAIRMAN'S ADDRESS <u>1422 N. Sunrise Ct.</u>	CITY <u>Payson</u>	STATE <u>AZ</u>	ZIP <u>85541</u>	
CHAIRMAN'S OCCUPATION <u>Claims Adjuster</u>	CHAIRMAN'S EMPLOYER <u>Absolute Adjusting</u>	CHAIRMAN'S E-MAIL ADDRESS <u>Jeffrey@SSAAL.com</u>		
NAME OF COMMITTEE TREASURER <u>Carolyn Decker</u>	TREASURER'S TELEPHONE # <u>480-363-6732</u>	TREASURER'S FAX #		
TREASURER'S ADDRESS <u>206 North Fenwick Cir</u>	CITY <u>Payson</u>	STATE <u>AZ</u>	ZIP <u>85541</u>	
TREASURER'S OCCUPATION <u>Retired</u>	TREASURER'S EMPLOYER <u>NA</u>	TREASURER'S E-MAIL ADDRESS <u>AZ kathy@gmail.com</u>		

