

Initial Application  
 Amended Application  
 Date: 08-23-19



**STATE OF ARIZONA**  
**COMMITTEE STATEMENT**  
**OF ORGANIZATION**

COMMITTEE ID NUMBER  
 (office use only)  
19-PC01

COMMITTEE TYPE (choose one):

RECEIVED 4:45 pm

**Candidate**

**AUG 23 2019**

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

TOWN CLERK  
TOWN OF PAYSON

*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): Unite Payson  
 (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): \_\_\_\_\_  
 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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COMMITTEE ID NUMBER  
(office use only)

COMMITTEE INFORMATION:

**Contact Information:** Committee's mailing address (required): 802A North Beeline Highway  
Committee's email address (required): stangarner@earthlink.net  
Committee's phone number (if any): 928.238.0341  
Committee's website (if any): \_\_\_\_\_

**Chairperson's Information:** Chairperson's name (required): Logan Stan Garner  
Chairperson's physical address (required): 802A North Beeline Highway, Payson, AZ 85541  
Chairperson's mailing address (if different): \_\_\_\_\_  
Chairperson's email address (required): stangarner@earthlink.net  
Chairperson's phone number (required): 928.238.0341  
Chairperson's employer (required): retired  
Chairperson's occupation (required): retired

**Treasurer's Information:** Treasurer's name (required): Kim Chittick  
Treasurer's physical address (required): 802A North Beeline Highway, Payson, AZ 85541  
Treasurer's mailing address (if different): \_\_\_\_\_  
Treasurer's email address (required): kimchittick99@gmail.com  
Treasurer's phone number (required): 928.978.5245  
Treasurer's employer (required): retired  
Treasurer's occupation (required): retired

**Bank or Financial Institution:** Bank name (required): National Bank of Arizona  
(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: *Logan Stan Garner* Date: 8/23/19  
Treasurer's signature: *Kim Chittick* Date: 8-23-19  
Candidate's signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_