



COMMITTEE ID NUMBER

19-12-02

## COMMITTEE INFORMATION:

TOWN CLERK TOWN OF PAYSON

|         | Committee name: REFORM   |                          |
|---------|--|--------------------------|
|         | Mailing address: 901 N MCLANG RO PAYSON AZ 85541   |                          |
|         | Email address: HUNTERAUTOLD GMAIL, CON   | :                        |
| ,       | Phone number: 928 978-0329   |                          |
|         | Website:   |                          |
| ŀ       | Chairperson name: KATY DECKER  | ļ                        |
| -       | Treasurer: GREG FRIE STAD  | 1                        |
|         |  |                          |
| DECLARA | ATION AND SIGNATURES:  |                          |
|         | I declare under penalty of perjury that the foregoing information is true and correct. I further declare that: (1) the committee will receive any contributions or make any disbursements; (2) the committee either (a) has no outstanding debts or obligations, or (outstanding debts or obligations that are all more than five years old, and the committee's creditors have agreed to discharge the and obligations and have agreed to the termination of the committee; (3) any surplus monies have been disposed of and that the committee has no cash on hand; and (4) all contributions and expenditures have been reported, including any disposal of surple Chairperson's signature:  Date:  Da | b) has<br>ne debts<br>ne |
|         | Candidate's signature (if applicable): Date:   | )                        |